

**BOARD OF REGISTERED NURSING
EDUCATION/LICENSING COMMITTEE MINUTES**

DATE: January 15, 2009

DRAFT

TIME: 11:30 AM to 2:00 PM

LOCATION: Hilton Garden Inn
1800 Powell Street
Emeryville, CA 94608
(510) 658-9300

PRESENT: Elizabeth Dietz, EdD, RN, CS-NP, Chair
Susanne Phillips, RN, MSN, APRN-BC, FNP

NOT PRESENT: Andrea Guillen-Dutton, Public Member

STAFF PRESENT: Ruth Ann Terry, EO, Louise Bailey, MEd, RN, SNEC; Maria Bedroni, EdD, RN, SNEC; Badrieh Caraway, MS, RN, NEC; Katie Daugherty, MN, RN, NEC; Miyo Minato, MN, RN, NEC; Janette Wackerly, RN, MBA, RN; Kay Weinkam, RN, MS, Carol Mackay, MN, RN, NEC; Alice Takahashi, MSN, RN; NEC, Geri Nibbs, MN, RN, NEC; Louisa Gomez, Licensing; LaFrancine Tate, Board Member; Heidi Goodman, AEO; Carol Stanford, Diversion; Julie Campbell-Warnock.

Dr. Elizabeth Dietz, Chair, called the meeting to order at 11:30 AM. Committee members introduced themselves.

10.0 APPROVAL OF JANUARY 15, 2009 MINUTES.

ACTION: Approve the Minutes of January 15, 2009.

MSC: Phillips/Dietz

Public input: None

10.1 RATIFY MINOR CURRICULUM REVISIONS

- 10.1.1 Contra Costa College Associate Degree Nursing Program
- 10.1.2 Gavilan College LVN to RN Associate Degree Nursing Program
- 10.1.3 Mount Saint Mary's College Associate Degree Nursing Program
- 10.1.4 Mount San Antonio College Associate Degree Nursing Program
- 10.1.5 Pasadena City College Associate Degree Nursing Program
- 10.1.6 Santa Rosa Junior College Associate Degree Nursing Program
- 10.1.7 Western Career College LVN-RN Associate Degree Nursing Program

ACTION: Ratified Minor Curriculum Revisions.

MSC: Phillips/Dietz

Public input: None

10.2 CONTINUE/NOT CONTINUE APPROVAL OF NURSING PROGRAM

10.2.1 Contra Costa College Associate Degree Nursing Program

Maryanne Werner-McCullough, RN, M.S., MNP is the Director of Nursing. Sara Brooks, M.S. is the Assistant Director and the department Chairperson.

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K. Weinkam, NEC presented this report. Contra Costa College is one of three community colleges within the Contra Costa Community College District, the eighth largest community college district in California. The College is located in San Pablo, and serves primarily the residents of West Contra Costa County. The program awards the associate in science degree for nursing.

A regularly scheduled continuing approval visit was conducted October 20-22, 2008, by K. Weinkam and C. Mackay, NECs. One area of non-compliance was identified, and one recommendation was given. The program provided its response within two weeks of the conclusion of the visit, and the Program's evaluation plan was modified as recommended.

The program's NCLEX pass rate for first-time test takers ranges from 91% to 100%, averaging 96% for the past five full academic years.

The program receives strong support from College administration. Over time, the program has steadily increased resources to support the expansion of the program and student success. The program has recently reconfigured a portion of the space in the skills lab to accommodate a simulation room with an adjacent observation room. Availability of the services of the Nurse Mentor and the Assessment Testing Project Coordinator have contributed to the program's success. Also, faculty take advantage of the learning opportunities made available and are receptive to incorporating new ideas that strengthen the program. The program started working with California State University, East Bay in August to write a proposal to facilitate seamless ADN to BSN articulation.

It is suggested that a progress report related to having obtained signatures on the agreements for all clinical facilities used by students for providing care be submitted by June 30, 2009.

ACTION: Continue Approval of Contra Costa College Associate Degree Nursing. Progress report due to the NEC by June 30, 2009.

MSC: Phillips/Dietz

Public input: None

10.2.2 Gavilan College LVN to RN Associate Degree Nursing Program

Karen (Kaye) Bedell, MSN, RN, FNP, is the Director of Nursing and Allied Health Programs

J. Wackerly, NEC, presented this report. J. Wackerly conducted a regularly scheduled continuing approval visit at Gavilan Community College ADN Program on October 27 - 29, 2008. The program was found in compliance with all the board's rules and regulations. Two recommendation were made: 1426 (d) curriculum, to strengthen the integration and application of professional nursing roles as authorized in the Nursing Practice Act; and 1429 (c) to provide student learning activities that demonstrate the competencies of professional nursing practice as defined in the Standards of Competent Performance, CCR Section 1443.5.

Gavilan College is located in Gilroy in Santa Clara County, approximately about one hour south of San Jose.

Gavilan College Allied Health Programs are based on a Career Ladder Options, starting with Nursing Assistant, progressing to Vocations Nursing with LVN licensure, and then to the LVN to RN program with RN licensure. A large portion of the students interviewed progressed from CNA to LVN and were enrolled in the RN program. The program admits LVNs from throughout the area. The program's prerequisites are designed to offer maximum flexibility in students achieving their educational goals.

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The program has been successful in obtaining grants 2004-through 2010 totaling \$1,034,577, from organizations that include Nova, VTEA, Kaiser Permanente, PreReq, Chancellor's Office capacity grants and equipment grants. The Allied Health programs are located in a building that is relatively new. The teaching occurs in a smart classroom, another classroom has 30 computers, skills lab is equipment with high fidelity manikins. Faculty members use technology in their teaching, such as i-clickers and Professional Development software (PDS) programs throughout the curriculum.

The nursing program has been able to obtain all clinical rotations at Santa Clara Valley Medical Center campus in San Jose CA. Medical-Surgical clinical is on a 59 bed unit with high acuity complex patients and the Arons Pavilion psych/mental facility offers learning experiences. The preceptorship includes clinical assignments at Santa Clara Valley Medical Center. The usual enrollment is 22 to 24 LVN-RN students.

The nursing program utilizes Elsevier textbooks that are bundled so students have a reduced cost. Elsevier evolve or [Http://evolve.elsevier.com](http://evolve.elsevier.com) is a course manager system available 24/7. Pocket Nurse is the vendor for the skills lab kit. Students may use computer programs for learning and remediation. All students have a PDA. Remediation for any student below benchmark is provided by faculty. The director is planning on purchasing a computer server so students will have access from home.

To ensure student success, students must complete an online Evolve Reach (NCLEX-RN Readiness Assessment Exam) at a score of 850 or higher which predicts probability of passing NCLEX-RN. Students who do not receive this score are required to remediate and retest prior to completion of the last course of the program.

ACTION: Continue Approval of Gavilan College, LVN to RN Associate Degree Nursing Program

MSC: Phillips/Dietz

Public input: None

Agenda item was reordered.

10.4 ACCEPT/NOT ACCEPT FEASIBILITY STUDY FOR PRELICENSURE NURSING PROGRAM

10.4.1 Simpson University Baccalaureate Degree Nursing Program

Jan Dinkel, RN Consultant and Patty Taylor, Dean of Continuing Studies represented Simpson University.

M. Bedroni, NEC, presented this report. Simpson University is a faith-based university located in Redding, California. Simpson University is regionally accredited by the Western Association of Schools and Colleges (WASC). Simpson offers 26 undergraduate majors, four graduate programs, and the ASPIRE adult degree completion program.

Originally located in San Francisco, Simpson University relocated to Redding in 1989 and began the process of building new buildings, becoming one of the most attractive campuses in the area. Simpson students are nurtured to develop holistically, think critically, lead effectively, and serve globally.

This feasibility study includes a good description of the emergent health and educational needs of the area. In close proximity to this new proposed program is a local community College, Shasta College, offering an RN and LVN programs and one proprietary college, Lake College, offering an LVN program. The closest BSN program to the proposed program is California State University, Chico, approximately 75 miles away.

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The feasibility study also includes a description of the expansion of health care facilities in the area, and it is realistic to think that the clinical areas will have room for the students of this new program. Clinical agencies evaluated for clinical experiences include acute care hospitals, long term facilities, ambulatory care centers, hospice, and psychiatric treatment centers.

Since it is a small community Simpson University has collaborated with clinical sites and have obtained letters of support offering placements; however creative scheduling still would be needed. Employers are supportive of this new program due to a great concern over the nursing shortage, particularly the need for baccalaureate prepared nurses in that particular geographic area.

Simpson University is proposing a four year baccalaureate program. The curriculum includes a strong Christian studies core as well as background in science and humanities. As planned the curriculum will have 59 nursing units (31 theory & 20 clinical). The total units for graduation will be 129 units. There is a brief description of each course included.

A target enrollment of 20 students as the initial class is planned for fall 2010. Twenty students will be admitted to the program twice a year with a total of eighty (80) students by spring 2014. Once the program begins, it is anticipated that more students will enroll as pre-nursing students.

Simpson University is a private university with a number of endowments for specific programs. The nursing program has been a part of their strategic planning; therefore, Simpson University is committed to this new proposed program. Currently, a new Nursing/Science Building is being built with endowment funds. Its completion is anticipated for 2010.

Simpson offers a generous fringe benefit package to all employees which will serve as an incentive to attract faculty. Simpson has also developed strong partnerships with local hospitals to ensure the success of this new proposed program.

Ms. Taylor reported that Skills/Simulation lab is the state of the art and the university has excellent relationship and is working very closely with the College of Siskiyous and Shasta College. ACTION: Accept the Feasibility Study for Simpson University Baccalaureate Degree Nursing Program.

MSC: Phillips/Dietz

Public input: None

10.4.2 Western Governors University Baccalaureate Degree Nursing Program

Accept/Not accept Feasibility Study for Western Governors University (WGU) Baccalaureate Nursing Program

J. Papenhausen, PhD.is the consultant; Jan Jones-Schenk, RN, MNA WGU.MAP RN Project Director.

M. Bedroni, SNEC, presented this report. WGU is the first online university, completely competence-based, and the first one to be funded through a multi-state gubernatorial partnership. It incorporated 11 years ago as a private, non-profit university. Headquarter is located in Sal Lake City, Utah.

WGU is accredited by WASC, and several other accrediting agencies. WGU is comprised of four online colleges: the Teachers College, the College of Business, the College of information Technology, and the College of Health Professions. The proposed program will be under the College of Health Professions. This college already has existing competence-based nursing programs, including a RN to BSN program, a MSN in Leadership/Management, and the MSN in Education programs. These programs were recently visited by CCNE; accreditation report is pending

As submitted the feasibility study proposes a generic nursing baccalaureate program serving Los Angeles, Riverside and Orange counties. The program is a collaborative effort among WGU, its hospital corporation's partners, a private funding foundation, and state workforce agencies. The partners include WGU, the Robert Wood Johnson Foundation, California Labor and Work Force Development agency, and major hospitals, including Hospital Corporation of America, Tenant Healthcare, Kaiser Permanente, and Cedars-Sinai Medical Center.

The program proposed is a generic baccalaureate program offered through WGU, which utilizes competency-based education, distance learning and advanced technology, both computer and clinical technology. The curriculum consists of a set of competencies, objectives, assessments and a course of study for each curricular area. These competencies were derived from a comprehensive set of national, professional, state and institutional standards entered into a standards database, along with input from professional nursing leaders who indicated what knowledge, skills, and dispositions a competent, caring nurse should possess. These competencies will be regularly reviewed, can be added, deleted and modified as warranted. Competencies are then mapped to the standards and program crosscutting themes to ensure congruency.

The program will utilize a model for clinical education adapted from models that have been successful in two sites in Texas both using the clinical coaching model and clinical instructors. In the WGU model students have a WGU academic **mentor** (faculty), a faculty subject matter expert who facilitates an online learning community, a qualified **clinical faculty** member, and an individual **clinical coach**. The clinical faculty and the clinical coach will be employees, the nursing staff, provided by the hospital partner.

The students will be assigned to a **clinical coach** in the unit which the coach provides clinical care. The student and the clinical coach will work together to provide clinical care to the four patients assigned to the clinical coach. The coach will be required to meet the qualification of a clinical teaching assistant. The WGU academic mentor is responsible for overseeing the clinical cohorts and their clinical faculty.

The academic mentors (faculty) under the direction of the National Director of Nursing and the Project Director, identifies measurable objectives that address each competency and recommends the type of assessment to measure student's mastery of the required competencies and objectives. Then they work with the assessment department, academic mentor faculty and external subject Matter Experts SMEs to develop performance and objectives assessments. Courses of study that align with these competencies will be used by students to manage learning and develop competency.

The BSN curriculum includes domains, sub-domains, and competencies. There are two major domains Nursing Science and Nursing Theory and Practice. The Nursing Theory and Practice Domain consists of didactic and clinical competencies in the major areas of nursing medical –surgical, obstetrics, pediatrics, psychiatric/mental health, and geriatrics. The Nursing Science domain includes five sub-domains: Pharmacology, Organizational Systems and Quality Leadership, Informatics, Evidence Based Practice and Applied nursing research, and Professional Roles and Values.

The proposed program will include 120 academic credits, 25 of which are natural, behavioral and social sciences, 9 academic credit of communication skills and 35 CU of pre licensure theory course and 18 CUs of prelicensure clinical courses and 20 CUs of upper Division courses

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WGU headquarter's facility is in Salt Lake City, Utah. They will have an additional office in California that will be staffed by the California Director. A letter was sent to WGU identifying concerns regarding this feasibility, WGU responded clarifying all areas of concern.

Dr. Dietz and Ms. Phillips asked for clarifications related to WGU's curriculum, the educational model, clinical learning arrangements, and their ability to fully meet the Board rules and regulations since it is headquartered outside of California. Ms. Jones-Schenk clarified that initially WGU will use existing skills labs, such as the one at Saddleback College, and arrangements are being negotiated and announced that WGU has hired a director of the nursing for the program.

ACTION: Accept the Feasibility Study for Western Governors University Baccalaureate Degree Nursing Program.

MSC: Phillips/Dietz

Public input: None

Returned to the agenda as ordered.

10.3 APPROVE/NOT APPROVE PROPOSED AMENDMENTS AND ADDITIONS TO REGULATIONS, TITLE 16, DIVISION 14, ARTICLE 3, NURSING PROGRAM

M. Minato, NEC, presented this report. At the September 19, 2008 Board meeting, the Board approved the proposed changes and additions to the regulations in Title 16, Division 14, Article 3, sections 1420 to 1430 with direction that non-substantive changes may be made by the staff and to proceed with the process for the regulatory changes. The Board also approved instructions and guidelines that were referenced in the proposed changes.

The proposed changes were brought before the ELC one additional time because a substantive change was made to the definition of "Institution of higher education". Other revisions were made to new sections 1426.1 Preceptorship and 1430 Advanced Placement, renamed as Previous Education Credit.

The foremost significant change is in section 1420(j), definition of "Institution of higher education" that received communications from accrediting organizations and public comments at previous committee and board meetings. The new definition reads "Institution of higher education" means an educational setting that provides post-secondary or higher education, such as a university, a community college, or other collegial institution that grants associate of arts degrees or baccalaureate or higher degrees to individuals who graduate from the nursing program". The revised definition makes no reference to accreditation. Attachments 1 and 1a show the regulations; Attachment 1 as document that will be used for public comments and 1a document noting all changes - deletions are noted as strike-outs and changes and additions are underlined. Attachments 2 to 6 were revised attachments that were referenced in the proposed regulations. Attachments 7 and 8 were guidelines that have been revised to reflect new regulations being proposed.

Below is a summary of changes made since the last meeting for clarity and consistency:

- Changed "NCLEX" back to previous language "licensing examination".
- Changed "Schools of Nursing" or school to "nursing program".
- Changed the five content areas, medical-surgical, obstetrics, pediatrics, psych-mental health, and geriatrics, to be consistent with the regulatory language used in 1426(d), "medical-surgical, maternal/child, mental health, psychiatric nursing and geriatrics."
- Combined definitions of "Education program" into "Course of instruction".
- Rearranged and reworded Sections 1426.1 Preceptorship and 1430 Previous Education Credit.

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ACTION: Approve proposed amendments and additions to Regulations, Title 16, Division 14, Article 3, Nursing Program.

MSC: Phillips/Dietz

Public input: Paul DeGiusti, representing Corinthian College, expressed concerns related to private post-secondary schools, such as the Corinthians, that are trying to receive initial nursing program approval but are not able since the Bureau of Private Postsecondary Vocational Education (BPPVE) is not in existence. He presented, for Committee's consideration, a proposed amendment to the Business and Professions Code section 2786(a). The Committee acknowledged Mr. DeGiusti's concern and received his documents.

10.5 Approve/Not Approve Goals and Objectives 2009 – 2011

M. Minato presented this item. Biennially committee goals and objectives are reviewed and revised as needed. The proposed goals and objectives for calendar year 2009-2011 were reviewed. Objectives have been reordered Goals 3, 5 and 6. Changes made to Goals included following goals:

- 1.1 Revised and combined public health nurse certificate requirement.
- 2.1 Expanded to reflect supportive roles the Board plays in development of partnerships.
- 3.2 Included collection of data on use of simulation in nursing education.
- 4.7/4.8 Added to maintain communication with advanced practice programs and to address concerns pertinent to advanced practice.

ACTION: Approve ELC Goals and Objectives 2009 – 2011.

MSC: Phillips/Dietz

Public input: None

10.6 INFORMATION ONLY

10.6.1 BRN 2007-2008 Annual School Report

Julie Campbell-Wornach, Research Program Specialist, reported on this item. The BRN 2007-2008 Annual School Survey was conducted from October 1, 2008 to November 17, 2008. The survey was conducted on behalf of the Board by the Research Center at the University of California, San Francisco. The final report will be available to the public on the BRN's Website when available.

10.6.2 2008 Goal Achievement Report

M. Minato, NEC, reported on this item. Annual report on achievements of ELC Goals and Objectives for 2008-2009 and summary of committee activities were made. Educational program activities related to continuing approval of nursing programs as well as review of new program approvals included the following:

- A total of thirteen (13)-nursing programs were reviewed in 2008: twelve (12) pre-licensure programs (2 BSN, 10 ADN); and one (1) advanced practice program (NP).
- The regular Interim visits were conducted as scheduled to a total of 22 prelicensure programs (7 BSN/ELM and 15 ADN). NEC's reviewed program's curriculum while conducting program review.
- Twenty (20) letters of intent for new prelicensure programs were submitted during 2008.
- Twelve (12) feasibility studies were reviewed by ELC and accepted six (6) new proposals (1 ELM; 4 BSN; and 1 ADN) and six (6) feasibility studies were deferred or not accept, including two programs that submitted their feasibility study twice.
- Seven (7) new programs were granted initial approval (1 ELM; 3 BSN; 3 ADN, including 1 LVN-RN program). This number includes one university that opened three separate BSN programs.

10.7 OPEN FORUM

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Maria O'Rourke, Maria W. O'Rourke, Inc., expressed her concern about the new graduates and RNs whom she comes in contact with lack knowledge of the RN's scope of practice, BPC section 2725. She further made a statement that RNs are missing role competencies of a professional nurse, specifically that of the decision making role. Ms. O'Rourke encouraged nursing programs to revisit their educational outcomes and ensure that professional roles and competencies are socialized and developed throughout their nursing program.

Meeting adjourned at 12:45 PM.

Submitted by:

Approved by:

Miyo Minato, MN, RN
Nursing Education Consultant

Elizabeth Dietz, EdD, RN, CS-NP
Chairperson

**BOARD OF REGISTERED NURSING
EDUCATION/LICENSING COMMITTEE MINUTES**

DATE: October 16, 2008

TIME: 10:00 AM to 1:00 PM

LOCATION: DoubleTree Guest Suites
835 Airport Blvd
Burlingame, CA 94010
(650) 344-5500

PRESENT: Elizabeth Dietz, EdD, RN, CS-NP, Chair
Susanne Phillips, RN, MSN, APRN-BC, FNP

NOT PRESENT: Andrea Guillen-Dutton, Public Member

STAFF PRESENT: Louise Bailey, MEd, RN, SNEC; Maria Bedroni, EdD, RN, SNEC;
Badrieh Caraway, MS, RN, NEC; Katie Daugherty, MN, RN, NEC; Miyo Minato, MN, RN, NEC;
Janette Wackerly, RN, MBA, RN; Kay Weinkam, RN, MS, NEC; Louisa Gomez, Licensing; LaFrancine
Tate, Board Members; Heidi Goodman, AEO; Carol Stanford, Diversion.

Dr. Elizabeth Dietz, Chair, called the meeting to order at 10:00AM. Committee members introduced themselves.

10.0 APPROVAL OF AUGUST 21, 2008 MINUTES.

ACTION: Approve the Minutes of August 21, 2008.

MSC: Phillips/Dietz

Public input: None

The meeting was stopped for a short period due to power outage and resumed at 10:06. Susanne Phillips chaired the remainder of the meeting.

10.1 RATIFY MINOR CURRICULUM REVISIONS

- 10.1.1 California State University, Bakersfield, Baccalaureate Degree Nursing Program
- 10.1.2 California State University, Channel Islands, Baccalaureate Degree Nursing Program
- 10.1.3 California State University, Stanislaus, Baccalaureate Degree Nursing Program
- 10.1.4 University of California, Los Angeles, Baccalaureate Degree Nursing Program, and Entry Level Master's Degree Option
- 10.1.5 University of San Francisco, Baccalaureate Degree Nursing Program and Entry Level Master's Degree Option
- 10.1.6 Butte College Associate Degree Nursing Program
- 10.1.7 Golden West College Associate Degree Nursing Program
- 10.1.8 Modesto Junior College Associate Degree Nursing Program

Progress report by NECs on the following programs:

- 10.1.9 California State University, Channel Islands, Baccalaureate Degree Nursing Program

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- 10.1.10 Concordia University, Irvine, Accelerated Baccalaureate Degree Nursing Program
- 10.1.11 College of the Siskiyous, LVN to RN Associate Degree Nursing Program
- 10.1.12 San Joaquin Valley College LVN to RN Associate Degree Nursing Program

ACTION: Ratified Minor Curriculum Revisions.

MSC: Dietz/Phillips

Public input: None

10.2 CONTINUE/NOT CONTINUE APPROVAL OF NURSING PROGRAM

10.2.1 National University Baccalaureate Degree Nursing Program

Mary Kracun, PhD, RN, is the current Chair and Program Director for NU's BSN Program. No member was present to represent NU. M. Minato, NEC, presented this report. C. Mackay and M. Minato, NEC's, conducted a continuing approval visit on July 21-22, 2008 at NU BSN Program. The program was in compliance with Board rules and regulations. Three recommendations were made in CCR Sections 1424(b) Policies and Procedures, 1424(d) Resources, and 1426(b) Curriculum.

NU's generic BSN Program in San Diego was initially approved in August 2004. Nursing courses are conducted primarily at the Rancho Bernardo campus. The plan was in place to centralize nursing faculty and courses to Rancho Bernardo and the construction has just begun at the time of the visit. Plans for the remodel include addition of clinical lab area for simulation to the two skills lab currently in place. Both Day and Evening programs are available at this campus.

Besides the generic BSN program, NU offers Accelerated BSN and an ASN track and continues to offer the RN-BSN completion program, which it had previously offered. Starting this fall, the ASN track will be continued, but will not be listed in the catalog as a separate option. NU was approved in June 2007 to have extended campuses in Los Angeles and Fresno areas. However, these sites are non-operational at this time due to faculty recruitment and clinical placement difficulties. There is a search committee doing recruitment for these sites.

Current NU nursing student enrollment has a total of 445 students, 294 are prelicensure students, 243 are in their generic BSN program, 51 students are in their Associate Degree option. In addition, there are 81 LVN-ASN and 17 LVN-BSN, with one in the RN-BSN track. The Program admits four times a year and has rolling admission. Clinical placements are worked through the San Diego's Consortium for clinical placement, and they have been able to find appropriate sites for their students' experiences.

There are ten (10) FT faculty, including the Director and Assistant Director, and 72 PT faculty providing instruction and supervision of students. Both the Director and Assistant Director have 80% release time each and have teaching responsibilities. The FT faculty group is dedicated hard-working educators, who work well as a group and have high standards for their students. Students spoke of faculty's willingness to assist and provide learning opportunities.

Faculty have plans to integrate simulation into their curriculum starting this fall. At the time of the visit, the Lab Coordinator position remained unfilled, and each faculty, if needed, would provide individual instruction in the lab. This unfilled Lab Coordinator position is critical for the success of students related to the organization of the lab, remediation and tutorial available to students, and with the implementation of simulation into clinical instruction. Therefore, this position should be filled as soon as possible.

The FT faculty, usually the lead faculty, works with four (4) to (6) PT faculty. Although the program has in place steps to include all faculty to participate in curriculum development and implementation, the

faculty turnovers and the frequency of admission cycle provides little time for critical review and evaluation of the curriculum.

Concerns related to faculty and the curriculum issues were discussed with the faculty, Director and Dean for additional FT faculty positions, considering the proportion of FT to PT, and formalizing the faculty orientation program currently being done informally.

ACTION: Continue Approval of National University Baccalaureate Degree Nursing Program. Submit a progress report on the recommendations to NEC by December 31, 2008.

MSC: Dietz/Phillips

Public input: None

10.2.2 Fresno City College Associate Degree Nursing Program

Stephanie Robinson, RN, B.S.N., M.H.A., CPHQ, is the Director of the Nursing Program.

K. Weinkam, NEC, presented this report. Fresno City College was established as California's first community college in 1910. It awards the Associate in Science degree in Nursing. It admits students three times a year and currently has 271 enrolled students. The program continues to offer the paradigm program in which area hospitals contract with Fresno City College for education and provide their employees with release time to pursue their degrees while working. Now that West Hills College Lemoore has been approved to offer its own prelicensure nursing program, Fresno City College no longer enrolls students there in its previously approved satellite program. The program's NCLEX pass rate for first-time test takers ranges from 74% to 86% for the past five years, with the pass rate for 2006-2007 being 81%.

Carol Mackey and Kay Weinkam, NECs, conducted a regularly-scheduled continuing approval visit from April 22-24, 2008. The program was found to be in non-compliance with Regulations 1424(b)(1) Total Program Evaluation; 1424(h) Faculty Qualifications; 1426(a) and (c)(1) Curriculum; and 1427(c) Clinical Facilities. Four recommendations were made.

As a response to the Findings, the program forwarded a copy of the agenda for a FCC Curriculum Committee meeting in which a revision to Registered Nursing 10 Psychiatric and Mental Health Nursing Clinical was presented that restored 0.5 unit to the program.

The program developed a plan so that the students who completed the clinical course for which units had been reduced were given the opportunity to acquire the requisite hours. The course has been revised and approved at the College level to restore the one-half unit to the clinical course in psychiatric/mental health nursing so that the program is now in compliance with CCR Sections 1426(a) and (c)(1).

The program also submitted progress reports June 27th and September 19th, 2008. The program indicates it has established a plan for program evaluation and action on identified areas for modification or implementation. Program faculty met May 6 and established committees that met in August to begin evaluation of the program. It is expected that there will be one student representative from each semester on each committee. The committees will address the Recommendations for Section 1424(b), (g), and (k) as part of its discussions.

The program's statements about its areas of strength and areas that need improvement were presented to the committee, as are two pages from the self-study developed for the College that constitute part of its progress report. The program has now submitted a plan for a major curriculum change that is the result of several years work on behalf of the faculty.

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The template for the affiliation agreements meets the requirements for CCR Section 1427, and the program indicated that it could not meet the July 1, 2008, deadline for getting the agreements that comply with the regulation signed by the appropriate facilities and requests an extension until November 30, 2008. A progress report related to having obtained signatures on the agreements for all clinical facilities used by students for providing care is to be submitted by December 31, 2008.

ACTION: Continue Approval of Fresno City College Associate Degree Nursing Program. Submit a final progress report by December 31, 2008.

MSC: MSC: Dietz/Phillips

Public input: None

10.2.3 Mendocino College Associate Degree Nursing Program

Barbara French PhD, MSN, FNP, RN Director of the program.

J. Wackerly, NEC, presented this report. On April 21, 22, 23 2008, J. Wackerly RN, NEC, conducted a continuing approval visit at Mendocino College Associate Degree Nursing Program. There were no areas of non-compliance and no recommendations were made.

Mendocino College Nursing Program was first approved by the board in September 2003 as a LVN-RN program. The nursing program was visited in 2005 for the first year completion of the LVN to RN program, with the first cohort RN-NCLEX pass rate of 78.57%.. The Mendocino College nursing program requested board approval for a generic RN ADN program that was approved in May 2005. The nursing program was visited first year completion of generic RN program in 2006. The nursing program has been using the ATI testing with 70% pass rate for student success and each course has an ATI test. The Chancellor's office formula is used for admission criteria. There have been three cycles of nursing students with the following NCLEX pass rate for first time test takers 2005-2006 88.89%; 2006-2007 83.33%; and 2007-2008 89.47%.

Mendocino College is located in Ukiah California a rural community. The program utilizes acute hospitals and clinic agencies in Ukiah, Willits, Santa Rosa, Lakeport, and Children's Oakland to implement the curriculum. The program has limitation for expansion due to limited acute care clinical facilities. The program utilizes Santa Rosa Medical Center and Kaiser Santa Rosa for acute care complex patient assignments. The program utilizes four rural hospitals, Ukiah Valley Medical Center, Howard Hospital Willits, Sutter Lakeside Hospital and Rosebud Hospital. Rural health clinics and private primary clinics are utilized for student learning experiences.

The nursing students are supported by the nursing faculty in their learning activities; students state they have adjusted to the travel to get the best clinical experiences in Santa Rosa and the rural hospitals and clinic agencies. The students would not give up going to Children's Oakland after having the clinical experience. The faculties are knowledgeable clinicians and competent teachers who are engaged with their students in all learning opportunities. The faculties are available in person and by e-mail to all nursing students, classroom and faculty offices are adjacent to one another. The nursing program has a smart classroom and utilizes a high fidelity manikin for simulation. There is a traditional skills lab within the smart classroom.

Mendocino College Nursing Program has received outside money including Capacity Grants, Song Brown Funds, Howard Hospital Willits provides funds, Medical Society, MC Foundation and a private scholarship funded for students.

ACTION: Continue Approval of Mendocino College Associate Degree Nursing Program.

10.3 APPROVE/NOT APPROVE MAJOR CURRICULUM REVISION

10.3.1 Los Angeles County College of Nursing and Allied Health Associate Degree Nursing Program

Zenaida Reyes, M.Ed Dean School of Nursing; Jeffery Anderson, MSN Assistant Director; Vivian Branchick, CNO/Director of Nursing Affairs, LA County Department of Health Services.

M. Bedroni, SNEC, presented this report. The Los Angeles County College of Nursing and Allied Health (LAC CONAH) faculty requested a major curriculum revision to re-open the extended campus at Olive View-University of California, Los Angeles Medical Center (OV-UCLA).

In 1992 this Board approved an extended campus at the Olive-UCLA site, but in 2003 it was closed because budget constraints. Recently the administration of the OV-UCLA decided that in order to improve access to nursing education for the students from the San Fernando Valley, Santa Clarita, and Antelope Valleys, the extended campus needed to be re-opened. Therefore, a proposal for funding was submitted to LA Care and OV-UCLA was awarded a grant for \$3 million dollars from June 2007 through June 2010. These grant funds will offset costs to hire faculty and staff, to develop and manage the extended campus, to purchase equipment and supplies and to recruit and enroll students. Furthermore, this grant allocated funding for clerical support, a library assistant and a librarian at the main campus.

In addition the LAC Department of Health Services has committed to provide extra administrative positions to support an Administrative assistant for financial aid, Staff assistant for office management and an Information Systems Analyst to oversee computer systems and processes at both campuses. All the positions funded are fulltime positions.

The curriculum offered at the extended campus is the exact replica of the one at the primary site. All policies and procedures at both sites are exactly the same. Student services will replicate those services provided to students in the main campus. Faculty and students will be members of the different committees at the main campus and will have same or comparable resources available at both campuses. The entire faculty as a group will be responsible to implement and evaluate all aspects of the nursing program at both sites main and extended campus.

The Dean of the School of Nursing at the main campus will have the administrative oversight of the extended campus however; an Assistant Director will coordinate the extended program at the site. The total staff for the site will be ten full time employees. The faculty will consist of one senior faculty/assistant director, one skills lab coordinator, four nursing instructors, one librarian, one library assistant, and two typists.

The Olive View Extended Campus will have one cohort of 20 students per semester, with a faculty/student ratio of 1:10. Although the OV-UCLA Medical Center is currently been utilized by several other nursing programs in the community, the medical center assures this Board that the admission of these new extended campus students will not displaced the clinical opportunities of the other students.

The proposed extended campus will be located at the OV-UCLA MC Education Center. The site was visited and includes sufficient space for faculty offices, classrooms, skills lab, computer lab, office and reception space. The librarian and the library assistant will have space provided at the library.

ACTION: Approve Major Curriculum Revision for Los Angeles County College of Nursing and Allied Health Associate Degree Nursing Program to re-open the extended campus site at the Olive View-UCLA Medical Center to offer prelicensure nursing program.

MSC: MSC: Dietz/Phillips

Public input: None

10.4 ACCEPT/NOT ACCEPT FEASIBILITY STUDY FOR PRELICENSURE NURSING PROGRAM

10.4.1 Concorde Career College, North Hollywood, Associate Degree Nursing Program

Sherry Almond, Director; Michelle Welch, Regional Nursing Director and other members of CCCNH were present in the audience.

M. Bedroni, NEC, presented this report. Concorde Career College, North Hollywood (CCCNH), submitted the first version of the feasibility study July 2007. A detailed letter was sent to the program indicating the areas that needed further clarification. The second revised revision was presented to the ELC last March 2008. At the time the, the ELC deferred action. This last revision was submitted August 2008.

CCCNH is a privately owned institution, for-profit, located in North Hollywood and serving other surrounding cities of Los Angeles County. The college is located at 12412 Victory Blvd. North Hollywood. The college consists of 30,000 square foot building. Two classrooms are dedicated to the proposed program, one accommodate 34 students the other 40 students. There are three computer labs. There are apparently sufficient spaces allocated for the director, secretary, skills lab and students. Other resources such as a library are available to students.

CCCNH is accredited by the Accrediting Commission of Career Schools and Colleges of Technology (ACC SCT) and currently has programs such as Massage Therapy, LVN, Medical Assistant and others. This organization accredits programs that educate students for occupational, trade and technical careers, and including institutions that offer programs via distance education. (<http://www.accsct.org>)

CCCNH received approval from the Bureau of Private Post Secondary and Vocational Education (BPPVE) that expires December 31, 2008. However, BPPVE is no longer in existence, and therefore, CCCNH will not have the ability to grant degrees after December.

The program has revised the service area to a 25-mile radius from the school, but still has identified 47 vocational programs, 14 associate career programs and four BSN programs within this radius.

In preparation for this program CCCNH conducted their own feasibility study, prepared October 2006 and updated June 2007, to find the need for this program (F.S. exhibit 7). The summary statement of that document clearly stated that only five of the 12 acute hospitals expressed their openness to discuss placement of students in their clinical area. It, also, stated that there are limiting numbers of clinical slots in acute care hospitals in the area. CCCNH plans to utilize the following clinical agencies for student rotations:

- **Burbank Health Care Center** - The clinical facility form indicates a census of 179 patients. However, the units available indicate a census of 35 M/S patients with one RN and 144 geriatric patients with one RN. This agency is currently utilized by other schools.
- **Motion Picture TV Fund** – a LTC facility. This agency is also utilized by four other programs and the form indicates the presence of only one RN for 149 patients.

- **Veterans West LA** (acute) – The signed form indicates placement in two wards. However, the form is incomplete and it is difficult to read.
- **Verdugo Hills** (acute) – This hospital is utilized by many other programs. The units identified are M/S, census of 30 patients, Obstetrics, census of 10 patients, and Psych, census of 20 patients.
- **Mission Community Hospital** (acute) – Form is incomplete and currently this agency is utilized by three other LVN programs.
- **Hubert Humphrey Clinic** – There is a census of 100 patients, only two RNs. Can only place two students at a time. The form is also incomplete.
- **Pacifica Hospital** (acute, subacute, and Mental Health) – The daily census in M/S is 27, Obstetrics, 8, Pediatrics 3, and Psych 35. Can only place 4, 3, or 1 at a time.
- **Glendale Adventist Medical Center** – the form is incomplete. They can place students in M/S, five students, Obstetrics, not more than three, and Psych, not more than five. The form is not signed.

The feasibility submitted indicates that only two of the potential clinical facilities plan to expand within the next two years (Mission Community and Glendale Adventist Medical Center). Therefore, based on the above information, there is a great concern for clinical placement.

CCCNH proposes an Associate Degree Nursing Program (Generic Option) of one year and two months. This option will have 60 weeks in length, consisting of six (6) ten (10) weeks terms. The program will have 75.5 units. Twenty one (21) semester units of nursing theory and eighteen (18) semester units for clinical.

The units as submitted need revision. There is also a “Bridge Option” with 77.5 semester units. LVNs entering this program will be given for thirteen units for LVN licensure and their education. The curriculum does not have all the required subject matter. Currently the program has completed an articulation agreement with a private university, University of Phoenix, for transferability of units.

CCCNH proposes to admit the first cohort of 30 students in the first quarter of 2009. Therefore, the program will enroll 60 students per year. The program plans to recruit faculty as the curriculum is developed and to have a ratio of 15 student/per faculty

CCCNH has allocated \$325,000 for start up cost of the proposed program and the Hollywood campus in addition to the parent corporation state that they will be able to support this new program.

The major areas of concern for this proposed program are: their ability to grant degrees, clinical placement, resources, faculty recruitment, proposed curriculum and transferability of units and accreditation.

With the number of nursing programs (18) already existing within the 25 mile radius of the proposed nursing program, ELC member raised the question whether the feasibility study addressed the need for another prelicensure program in this location, recognizing that there is a nursing shortage. There were, also, concerns related to adequacy of clinical placements by the committee. Additionally, CCCNH will not have degree granting authority to offer an Associate of Arts Degree, and therefore, will not meet the Board requirements. The program needs to clarify degree granting issues, clinical placements, and articulation agreements.

Sherry Almond, Director, reported to ELC that CCCNH has a very successful LVN program and that they have been working with clinical sites and completing all required forms.

Paul De Giusti of CCCI/Everest College raised an issue related to BPPVE. It was his argument that in its absence, there was no authority that issued authority to grant degrees for private, post-secondary schools. Discussions related to degree-granting and accreditation followed but tabled for discussion during Agenda Item 10.5.1.

ACTION: Not Accept the Feasibility for Concorde Career College, North Hollywood, Associate Degree Nursing Program.

MSC: MSC: Dietz/Phillips

Public input: Patrick Debold, VP of Academic Affairs, CCCI, thanked the Committee and indicated that the college will correct the deficiencies and resubmit the feasibility study.

10.5 INFORMATION ONLY

10.5.1 Information only: National and Regional Accreditation Agencies

M. Bedroni, NEC, presented this report. The purpose of this informational item is to clarify two issues: degree granting requirements and accreditation.

For the last few months the Board has received feasibility studies from private organizations that currently do not have the authority to grant degrees in the State of California, as the Bureau of Private Post Secondary and Vocational Educational (BPPVE) is not longer in existence. If the institution cannot grant degrees then this Board cannot proceed with the approval steps. Below is the section addressing approval of schools.

The Business & Profession Code states under Section **2786. Approval of Schools**

(a) An approved school of nursing is one which has been approved by the board, gives the course of instruction approved by the board, covering not less than two academic years, is affiliated or conducted in connection with one or more hospitals, and is an institution of higher education or is affiliated with an institution of higher education. For purposes of this section, "institution of higher education" includes community colleges offering an associate degree. An approved school of nursing which is not an institution of higher education shall make an agreement with an institution of higher education in the same general location to grant an associate of arts degree to individuals who graduate from the school of nursing or to grant a baccalaureate degree in nursing with successful completion of an additional course of study as approved by the board and the institution involved.

It is unclear after the demise of the BPPVE which state agency will take over the role of the BPPVE to give private colleges and universities the authority to grant degrees in California. However, SB 823 is at the governor's office pending signature and this bill will change the name of the Bureau of Private Postsecondary and Vocational Education to the Bureau of Private Postsecondary Education. If signed this legislation will be known as the California Private Postsecondary Education Act of 2008.

Accreditation

The document titled "Instructions for Institutions Seeking Approval of New Pre-licensure Nursing Programs" referenced in the proposed regulation requires that the program seeking approval needs to be accredited. Many of these private organizations sometimes called "colleges" or "universities", may or may not have accreditation. Some may have it for some of the programs they offer such as massage therapy, EKG technician, laboratory technician, or licensed vocational nursing. This accreditation is mandated by the Department of Education for their students to be eligible to obtain educational funding. The accreditation status does not give them the authority to grant degrees as this authority comes from the state.

A review of several accreditation agencies was done and many phone conversations with key people from these agencies occurred. For the purpose of clarification a brief description of the agencies most commonly utilized from these private organizations follows:

US Department of Education

The United States has no Federal Ministry of Education or other centralized authority exercising single national control over postsecondary educational institutions; therefore institutions widely varied in the quality of their programs. However, the States assume varying degrees of control over education.

To ensure basic level of quality, accreditation arose as means of conducting non-governmental, peer evaluation of educational institutions and programs. Private educational associations of regional or national scope adopted criteria reflecting the qualities of a sound educational program and developed procedures for evaluating institutions or programs to determine whether or not they are operating at basic levels of quality.

There are two types of educational accreditation: institutional and programmatic. Institutional accreditation normally applies to an entire institution and programmatic accreditation normally applies to programs, departments, or schools that are parts of an institution. (<http://www.ed.gov>)

The U.S. Department of Education does not accredit colleges, universities or other postsecondary institutions. Accreditation in the U.S. is done by "accrediting agencies" -- private regional or national associations that have adopted criteria reflecting the qualities of a sound educational program and have developed procedures for evaluating institutions or programs to determine whether or not they are operating at basic levels of quality. The fact that a college or postsecondary institution is accredited does not guarantee that credits or degrees earned at that institution will transfer to another institution or be recognized by a potential employer. Acceptance of students or graduates is always the prerogative of the receiving institution or employer. (<http://www.ed.gov>)

Some of the functions of accreditation listed under the US Department of Education website are cited below:

1. Verifying that an institution or program meets established standards;
2. Assisting prospective students in identifying acceptable institutions;
3. Assisting institutions in determining the acceptability of transfer credits;
4. Helping to identify institutions and programs for the investment of public and private funds;
5. Protecting an institution against harmful internal and external pressure;
6. Creating goals for self-improvement of weaker programs and stimulating a general raising of standards among educational institutions;
7. Involving the faculty and staff comprehensively in institutional evaluation and planning;
8. Establishing criteria for professional certification and licensure and for upgrading courses offering such preparation; and
9. Providing one of several considerations used as a basis for determining eligibility for Federal assistance. (<http://www.ed.gov>)

The Secretary of Education is required by law to publish a list of nationally recognized accrediting agencies that the Secretary determines to be reliable authorities as to the quality of education or training provided by the institutions of higher education and the higher education programs they accredit.

The U.S. Secretary of Education also recognizes State agencies for the approval of public postsecondary vocational education and State agencies for the approval of nurse education such as National League for Nursing Accrediting Commission and the Commission on Collegiate Nursing Education, the American College of Nurse-Midwives, Accreditation Commission, and the Council on Accreditation of Nurse Anesthesia Educational Programs. Each of the postsecondary educational institutions and programs contained within the database is, or was, accredited by an accrediting agency or state approval agency recognized by the U.S. Secretary of Education as a “reliable authority as to the quality of postsecondary education” within the meaning of the Higher Education Act of 1965, as amended (HEA).

- (a) Pursuant to section 438(b) of the Higher Education Act of 1965 as amended by the Public Law 92-318, the United States Secretary of Education is required to publish a list of State agencies which he determines to be reliable authorities as to the quality of public postsecondary vocational education in their respective States for the purpose of determining eligibility for Federal student assistance programs administered by the Department of Education.
(<http://www.ed.gov>)

The clear intent of the accrediting agencies listed under the US Department of Education is for determining if the programs meet the eligibility for student federal assistance.

The US Department of Education website also indicates that for years there have been some kind of non-governmental coordinating agency that exist primarily for the purpose of coordinating and improving the practice of accreditation. First was the Council on Postsecondary Accreditation (COPA), which was established in 1974 and existed until 1993. Its purpose was to foster and facilitate the role of accrediting agencies in promoting and ensuring the quality and diversity of American postsecondary education. After COPA dissolved in December 1993, a new entity, the Commission on Recognition of Postsecondary Accreditation (CORPA) was established in January 1994 to continue the recognition of accrediting agencies previously carried out by COPA. CORPA was dissolved in April 1997 after the Council on Higher Education Accreditation (CHEA) was created. CHEA is currently the entity that carries out a recognition function in the private, nongovernmental sector. (<http://www.ed.gov>)

Council for Higher Education Accreditation (CHEA)

Is a nongovernmental higher education organization that scrutinizes the quality of a universe of accrediting agencies. It is the largest institutional higher education membership organization in the United States, with approximately 3,000 degree-granting colleges and universities and recognizes 60 institutional and programmatic accrediting organizations. It is governed by a 20-person board of college and university presidents, institutional representatives and public members.

The federal government, through the U.S. Department of Education, conducts governmental recognition reviews. Recognition is the scrutiny and certification of the quality of regional, faith-based, private career and programmatic accrediting organizations. CHEA is the only nongovernmental higher education organization that undertakes this scrutiny. CHEA is currently the entity that carries out a recognition function in the private, nongovernmental sector.

CHEA's commitment to the coordination and improvement of quality review is based on seven principles. These principles provide the foundation for the CHEA mission statement, the organizational functions described in the CHEA Bylaws and the CHEA Recognition Policy.

- *Quality Assurance.* CHEA will apply its recognition standards and sustain ongoing review of its participating accrediting organizations to assure high quality of organizational performance.

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- *Leadership.* CHEA will provide thoughtful leadership to formulate issues related to quality assurance; to develop needed tools and strategies to sustain the value of quality assurance to institutions, accreditors and students; and to advance change and needed improvement in quality assurance in higher education.
- *Advocacy.* CHEA will be a forceful and articulate advocate for voluntary accreditation of higher education to the public, government and other interested individuals, groups and countries.
- *Service.* CHEA will consistently provide high-quality research, policy analysis and service to its member institutions, accrediting organizations, students and the public.
- *Core Values.* CHEA will maintain the core academic values central to higher education and quality assurance. These include, for example, the values of general education, collegiality and academic freedom.
- *Independence.* CHEA will be an independent and authoritative voice for the strengthening of accreditation to strengthen higher education.
- *Inclusion.* CHEA will sustain an environment of active consultation and participation among its member institutions and participating organizations, as well as encourage cooperation and exchange throughout the higher education and quality assurance communities.

(Adopted by CHEA Board of Directors, January 2000)

<http://www.chea.org>.

The above information clearly indicates that CHEA approves accrediting agencies that accredit degree granting programs, and verifies that the respective organizations have authority to grant degrees.

Accrediting Commission of Career Schools and Colleges of Technology (ACCSCT)

Since 1967, the Commission has been continuously recognized by the U.S. Secretary of Education. However, this agency is not recognized by the CHEA, because they don't meet the eligibility requirements as its membership is less than fifty percent degree granting programs. However, it is recognized by the US Department of Education under the Higher Education Act previously mentioned above.

ACCSCT's scope of recognition includes the accreditation of private, postsecondary, non-degree-granting institutions and degree-granting institutions in the United States, including those granting associate, baccalaureate and master's degrees, that are predominantly organized to educate students for occupational, trade and technical careers, and including institutions that offer programs via distance education. (<http://www.accsct.org>)

This information clearly states that this organization accredits programs that are to educate students for occupational, trade and technical programs not professional programs such as registered nursing programs.

Council on Occupational Education (COE)

The Council was incorporated as a non-profit education organization under laws of the State of Georgia in June 1994. At the end of June 1995, the Council became a fully operational agency. Its current scope of recognition is as a national institutional accrediting agency for the accreditation of non-degree-granting and applied associate degree-granting postsecondary occupational education institutions. The mission of the Council is "assuring quality and integrity in career and technical education." The Council is a nationally-honored seal of excellence for occupational education institutions. One objective is to foster excellence in the field of career and technical education by establishing standards and guidelines for evaluating institutional effectiveness. (<http://www.council.org>)

Accrediting Bureau of Health Education Schools (ABHES)

This agency provides accreditation of private, postsecondary institutions in the United States offering predominantly allied health education programs and the programmatic accreditation of medical assistant, medical laboratory technician and surgical technology programs, leading to a certificate, diploma, Associate of Applied Science, Associate of Occupational Science, or Academic Associate degree, including those offered via distance education. (<http://www.abhes.org>)

Western Association of Schools and Colleges (WASC)

The Western Association of Schools and Colleges (WASC) is one of six regional accrediting associations in the United States. The Association provides assistance to schools located in California, Hawaii, Guam, the Commonwealth of the Northern Marianas, American Samoa, the Federated States of Micronesia, the Republic of the Marshall Islands, Fiji, and East Asia. The affairs of WASC are administered by a board of directors composed of representatives from the three commissions that are listed below:

(1) Accrediting Commission for Senior Colleges and Universities; (2) Accrediting Commission for Community and Junior Colleges; 3) Accrediting Commission for Schools. (Some of the private vocational programs are approved by this Commission)

This agency is recognized by CHEA

Accrediting Council for Independent Colleges and Schools (ACICS)

This agency accredits private postsecondary institutions offering certificates or diplomas, and postsecondary institutions offering associate, bachelor's, or master's degrees in programs designed to educate students for professional, technical, or occupational careers, including those that offer those programs via distance education. (<http://www.acics.org>)

Accrediting and Higher Education Opportunity Act of 2008

Another very important piece of information is the newly approved Accreditation and the Higher Education Opportunity Act of 2008 approved August 14, 2008. One of the significant changes within the eight accreditation areas is the inclusion of #6 the role of the institutional mission. Attached is a copy.

In summary the authority to grant degrees is only given to private schools by a state agency. At this time is not known if the Governor will sign SB823. If signed this legislation will be known as the California Private Postsecondary Education Act of 2008 and will take over the role of the BPPVE to give private colleges and universities the authority to grant degrees.

CHEA is currently the entity recognized by the US Department of Education that carries out a recognition function in the private, nongovernmental sector.

Public Input: Much discussion occurred following M. Bedroni's report. Paul DeGiusti addressed the Committee and pointed out various sections of the report, which he stated were incorrect. Dr. Paul Bott, of ACCSCT, spoke on the ACCSCT, the meaning of recognition by US DOE and CHEA. Dr. Bedroni reviewed requirements for school of nursing per BPC section 2786(a). Ruth Ann Terry, EO, re-emphasized that a school applying for the Board approval must have degree-

granting authority as required by this section. Ms. Terry, also, clarified that this Board does not have any jurisdiction with degree granting authority of a college. The Board members thanked the public for their comments and indicated they will take the comments received from this meeting under advisement.

10.5.2 Information Only: Clinical Rotations Out of State

M. Bedroni, SNEC, presented this report. An inquiry was done to Nevada, Arizona and Oregon states in reference to nursing programs conducting clinical rotations out of state. All three states addressed the issue in their respective rules and regulations. A description follows:

Arizona

The Board has a provision for distance learning programs and out of state programs. This is a fairly new section that became effective March 7, 2005. A nursing program located outside of Arizona that wishes to provide clinical experiences in Arizona shall obtain Board approval before offering a clinical rotation. There is a process that the program must follow that includes a self study and a statement regarding the anticipated effect on clinical placement for students enrolled in an Arizona approved nursing program.

The Board determines the compliance to meet specific requirements and may accept or deny the application. If denied, there is a hearing procedure to follow. Furthermore, the Board may rescind n approval held by an out of state nursing program to conduct clinical instruction in Arizona. Clinical faculty must have a license in Arizona.

In reference to allowing students seeking clinical experiences outside of Arizona, the nursing program must check with that state.

Nevada

Nursing programs wishing to conduct clinical experiences in Nevada must obtain approval from the Board. The application packet is very extensive (attached)

The process has not been used very often, however; the following programs are listed as approved. The only California program approved is an LVN program.

Dixie State College of Utah Department of Health Sciences Nursing Program 225 South 700 East St. George, UT 84770	Lassen Community College P.O. Box 3000 Susanville, CA 96130	Mojave Community College 1971 Jagerson Avenue Kingman, Arizona 86401
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Programs conducting a portion of its program in Nevada must also report to the Board that they are accredited or approved by the originating state and complete an annual report. Faculty must have a Nevada license. In reference to allowing students seeking clinical experiences outside of Arizona, the nursing program must check with that state.

Oregon

Oregon Administrative Rules for Nursing Education Programs allow students from another state to engage in supervised clinical practice in Oregon.

The expectation is that the program does provide adequate and appropriate instructor supervision, even if the student is working directly with a nurse preceptor. Furthermore, the program must meet all other Oregon Standards as well, such as having an agreement in place with each facility used, and having a policy for selection of clinical sites that includes, at a minimum, that the practice site "shall be fully approved by the appropriate accreditation, evaluation or licensing bodies, if such exist."

Additionally, Oregon Administrative Rules for Nursing Education Programs do allow students from Oregon to engage in clinical practice (with instructor supervision) in another state. Clinical faculty shall have a registered nurse license to practice and meet the requirements in the state in which the clinical experiencing is occurring.

All three states regulations related to out of state programs are attached. In summary, all three states:

- Require Board approval
- Must follow the state requirements for education
- Require clinical faculty to have a license in the state where the clinical experiences are occurring.
- Have the authority to review and rescind Board approval pending a review.

10.5.3 Information Only: NCLEX Pass Rate Update

K. Daugherty presented this report. The Board of Registered Nursing receives quarterly reports from the National Council of State Boards of Nursing (NCSBN) about the NCLEX-RN test results by quarter and with an annual perspective. The following tables show this information for 12 months and by each quarter.

NCLEX RESULTS – FIRST TIME CANDIDATES October 1, 2007 -September 30, 2008

JURISDICTION	TOTAL TAKING TEST	PERCENT PASSED %
California	9,660	87.22
United States and Territories	128,288	86.67

CALIFORNIA NCLEX RESULTS – FIRST TIME CANDIDATES By Quarters and Year October 1, 2007 – September 30, 2008

10/01/07- 12/31/07		1/01/08- 3/31/08		4/01/08- 6/30/08		7/01/08- 9/30/08		10/01/07- 09/30/08	
# cand.	% pass	# cand.	% pass	# cand.	% pass	# cand.	% pass	# cand.	% pass
682	75.37	3,031	89.21	1,850	88.05	4,097	87.33	9,660	87.22

**Includes (9), (4), (7) and (9) "re-entry" candidates*

4/1/07 Passing standard increased to -0.21 logits & revised NCLEX-RN Test Plan implemented.

The Nursing Education Consultants monitor the NCLEX results of their assigned programs. Current procedure provides that after each academic year, if there is substandard performance (below 70% pass rate for first time candidates), the NEC requests that the program director submit a report outlining the program's action plan to address this substandard performance. Should this substandard performance continue in the second academic year, an interim visit is scheduled and a written report is submitted to the Education/Licensing Committee. If there is no improvement in the next quarter, a full approval visit is scheduled within six months. A report is made to the Education /Licensing Committee following the full approval visit.

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K. Daugherty reported that the Board is working with National Council to schedule two regional faculty workshops in 2009 that focus on NCLEX test exam writing and test plan. There is also Magic in Teaching and Simulation Conference schedule in November 13 and 14th in San Francisco.

10.6 OPEN FORUM – None

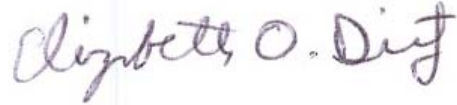
Meeting adjourned at 12:08 PM.

Submitted by:



Miyo Minato, MN, RN
Nursing Education Consultant

Approved by:



Elizabeth Dietz, EdD, RN, CS-NP
Chairperson

BOARD OF REGISTERED NURSING
Education/Licensing Committee
Agenda Item Summary

AGENDA ITEM: 10.1

DATE: March 19, 2009

ACTION REQUESTED:

Ratify Minor Curriculum Revisions

REQUESTED BY:

Miyo Minato, MN, RN
Nursing Education Consultant

BACKGROUND:

According to Board policy, Nursing Education Consultants may approve minor curriculum changes that do not significantly alter philosophy, objectives, or content. Approvals must be reported to the Education/Licensing Committee and the Board.

Minor Curriculum revisions include the following categories:

- Curriculum changes
- Work Study programs
- Preceptor programs
- Public Health Nurse (PHN) certificate programs
- Progress reports that are not related to continuing approval
- Approved Nurse Practitioner program adding a category of specialization

The following programs have submitted minor curriculum revisions that have been approved by the NECs:

- 10.1.1 American University of Health Sciences Baccalaureate Degree Nursing Program
- 10.1.2 Biola University, Baccalaureate Degree Nursing Program
- 10.1.3 California State University, Bakersfield, Baccalaureate Degree Nursing Program
- 10.1.4 California State University, Chico, Baccalaureate Degree Nursing Program
- 10.1.5 California State University, Fullerton, Baccalaureate Degree Nursing Program and Entry Level Master's Degree Option
- 10.1.6 California State University, San Marcos, Baccalaureate Degree Nursing Program
- 10.1.7 City College of San Francisco Associate Degree Nursing Program
- 10.1.8 Riverside City College Associate Degree Nursing Program
- 10.1.9 Sierra College Associate Degree Nursing Program
- 10.1.10 Victor Valley College Associate Degree Nursing Program
- 10.1.11 Yuba College Associate Degree Nursing Program
- 10.1.12 San Diego State University, Nurse Practitioner Program and Nurse Midwifery Program

NEXT STEP:

Place on the Board agenda.

**FINANCIAL
IMPLICATIONS,
IF ANY:**

None

PERSON TO CONTACT:

Miyo Minato, MN, RN
Nursing Education Consultant
323-890-9950

MINOR CURRICULUM REVISIONS
Education/Licensing Committee
DATE: March 19, 2009

SCHOOL NAME	APPROVED BY	DATE APPROVED	SUMMARY OF CHANGES
American University of Health Sciences BSN Degree Program	M. Minato, NEC	February 25, 2009	Program reported a change in location of the AUHS. New school location is 1600 East Hill Street, Signal Hill, CA 90755. The telephone number is the same, (562) 988-2278, www.auhs.edu . The effective date of the move was February 9, 2009. A site visit was made of the new facility, where renovation was continuing. Another visit will be made when all updating activities are completed. A meeting was conducted with the first cohort of graduating students (8 of 13 initial group) will graduate on June 18, 2009.
Biola University BSN Degree Program	K. Daugherty, NEC	January 13, 2009	Increase CRL by 1 unit (86 to 87 units) and total degree requirements by 1 unit (141 to 142 units) due to a 1 unit increase in Bios 252 Human Anatomy (3 to 4 units) by the science department.
CSU Bakersfield BSN Degree Program	M. Minato, NEC	February 3, 2009	Program submitted a curriculum change that would reduce the duration of their generic BSN program from 9 quarters to 7 quarters that allows students to reduce their completion time from 33 months to 21 months. The proposed changes combined related courses (theory and clinical) introduction, fundamentals and medical-surgical contents, forming three new theory and related clinical courses. The proposed changes reduce the entire nursing curriculum by one (1) clinical unit. There are a total of 72 qtr units of nursing (41 th; 31 cl), no changes to sciences and communication units. Total units required for licensure is reduced by one (1) unit to 121 units. Revised course syllabi were submitted with the request.
CSU Chico BSN Degree Program	K. Daugherty, NEC	February 4, 2009	Replace N281, a 1 unit service learning course with a 1 unit general education elective based on student/faculty evaluations and departmental funding constraints. CRL and total degree units will remain unchanged.

MINOR CURRICULUM REVISIONS
Education/Licensing Committee
DATE: March 19, 2009

SCHOOL NAME	APPROVED BY	DATE APPROVED	SUMMARY OF CHANGES
CSU Fullerton BSN Degree Program & ELM options	K. Daugherty, NEC	January 29, 2009	In the BSN and the ELM options, eliminate the 1 unit NCLEX prep course; increase N 411 from 1-2 units, and accept a 4-5 units chemistry course. In the BSN option only, add 3 units of history to the degree/GE requirements. In the ELM option, add 3 units of nursing practicum, N514 to the graduate/masters portion of the degree program and move N 401, Epidemiology, from CRL units to MSN degree units. CRL/TCP forms updated to reflect these changes.
CSU, San Marcos BSN Degree Program	K. Weinkam, NEC	December 19, 2008	The site at Temecula Education Center was visited to confirm suitability of the facilities, resources, and education offered through interactive classroom technology to the 52 students expected to enroll in the distance education program in January 2009. The program is an accelerated entry level baccalaureate program offered through the Office of Extended Learning.
City College of San Francisco ADN Program	K. Weinkam, NEC	November 12, 2008	Added program outcomes that reflect competencies in basic health care informatics and the use of critical thinking.
Riverside City College ADN Program	M. Bedroni, SNEC	February 10, 2009	Program changed some clinical rotations from 8 to 12 hours.
Sierra College ADN Program	K. Daugherty, NEC	February 2, 2009	Effective Fall 2009, re-number and re-title the core nursing program courses. Include medical-surgical content in each of the four core nursing program courses and re-sequence existing specialty content throughout the program. Total nursing theory units will increase from 43-44.1 units and CRL and total degree units will increase accordingly. The existing part-time program options (generic and LVN to RN) will be eliminated, allowing the program to increase enrollment in the full time program by ten students each term.
Victor Valley College ADN Program	B. Caraway, NEC	January 9, 2009	Program submitted the minor curriculum revision to add a three (3) units Assessment and Nursing Skills course (Nursing 246). This course is to be taken prior to Nursing Process 1(Nursing 221). This course will be given in two lecture and one skill lab units. Emphasis will be placed on developing interview skills, assessing cultural factors, and utilization of basic assessment techniques. The program also is adding one (1) unit of Physical Education which therefore brings the total program units from 73.5 to 77 units.

MINOR CURRICULUM REVISIONS
Education/Licensing Committee
DATE: March 19, 2009

SCHOOL NAME	APPROVED BY	DATE APPROVED	SUMMARY OF CHANGES
Yuba College ADN Program	K. Daugherty, NEC	January 28, 2009	Change Chemistry requirement to CHEM 2A or 2B thus increasing the total science requirement by 1-2 units. Require Math 52 instead of Math 51; accept Soc 1, 2, 5, or Anthro 2 to meet CRL and graduation requirements. Update CRL /TCP forms to reflect these changes and integration of geriatric content throughout the program in N 30, 32, 33, 34, 35, instead of just N32.
San Diego State University Nurse Practitioner Program Nurse-Midwifery Program	K. Weinkam, NEC	February 5, 2009	Previously integrated nurse-midwifery/women's health care nurse practitioner curriculum will now be offered as separate tracks. One additional summer practicum (N 696, 2 units) was added to afford students the opportunity to meet the clinical hours for specialization in both nurse-midwifery and WHCNP if they so choose.

BOARD OF REGISTERED NURSING
Education/Licensing Committee
Agenda Item Summary

AGENDA ITEM: 10.2.1

DATE: March 19, 2009

ACTION REQUESTED: Continue/Not Continue Approval for Dominican University of California (DUC) Baccalaureate Degree Nursing Program

REQUESTED BY: Katie Daugherty, NEC

BACKGROUND: Dr. Luanne Palmer-Linnard is the current program director and the Chair for the nursing department.

DUC is a private college in San Rafael. Dominican was originally affiliated with St.Luke's Hospital baccalaureate degree nursing program in the late 1980s, and as a university based program, graduated its first BSN degree graduates in 1991. To date about 980 graduates have completed the program. The program draws applicants from many parts of northern California and the Bay area because of its notable reputation of educational excellence in the community. Over the past six years, DUC has increased nursing program enrollment tremendously. Currently there are 200 students in the pre-nursing program track and about 274 students in the program.

A regularly scheduled continuing approval visit was conducted from November 5-7, 2008 by NEC, Katie Daugherty. One area of non-compliance CCR 1424(d) Resources and two recommendations CCR 1425.1/1426 Faculty/Curriculum and CCR 1429(c) LVN 30 Unit Option were identified as described in the attached summary of findings.

DUC's commitment to educational rigor, scholarship and student success is apparent at every level of the institution. The university enjoys a culturally and ethnically diverse student body and has an exceptional faculty group with excellent academic and clinical backgrounds in addition many years of teaching experience in undergraduate and graduate nursing programs.

In 2005, the program successfully implemented major curriculum changes to strengthen the curriculum, including the improvement of annual NCLEX pass rates that had been below 70% a number of times since the inception of the program. At the time of the November 2008 visit, there was sufficient evidence the program has improved annual pass rates considerably with annual rates ranging from 81.08-92.16% from July 2004-June 2008. The four year average from July 2004-September 2008 is 85.00%. Physical space has been a challenge over the past few years due to the rapid and sizable program expansion. Since the last visit in 2004, the program has added a small simulation lab on campus and enhanced the existing skills labs areas for students. DUC students also use the Marin Regional Simulation Lab that is a short distance from the DUC campus. The Marin regional simulation lab is well equipped and able to accommodate larger groups of students at one time. Skills and simulation labs at both sites are staffed with highly qualified staff including MSN level nursing educators with impressive simulation expertise. Future simulation plans include creation of a simulation birthing center and greater use of the regional simulation lab in the future. There is a space plan in place to remedy existing space limitations in 2010 and administration has reconfirmed plan implementation as described in DUC's response following the

visit. DUC's visit response documents provide clear evidence that DUC has worked diligently to promptly address the area of non-compliance and the recommendations.

NEXT STEP: Place on the Board agenda

**FINANCIAL
IMPLICATIONS,
IF ANY:** None

PERSON TO CONTACT: Katie Daugherty, MN
(916) 574-7685

DRAFT COPY
Approval Visit Report of Findings
Dominican University of California
Baccalaureate Degree Nursing Program
November 5-7, 2008

Non Compliance(s) CCR 1424 (b) (1), (c), (d), (e), (f), (j) Program Administration and Sufficiency of Resources: Insufficient resources to adequately achieve program objectives.

- Revise written program evaluation plan to reflect all of the aspects of program evaluation and data collection/analysis being done.
- Increase the percent of release time for the program director and assistant director(s) to adequately administer the pre-licensure nursing program.
- Increase administrative/clerical support staff by at least .5 FTE to adequately meet the day to day support services needs of students/faculty and ensure timely submission/complete recording keeping of required compliance documentation.
- Fund/sustain funding for the proposed full time remediation/retention specialist position to meet student learning needs/minimize program attrition.
- Re-evaluate faculty and the skills/ simulation lab staff teaching loads given the significant increase in student enrollment/student learning needs.
- Ensure ongoing, easy access, to properly working test analysis equipment/software for faculty use and to facilitate timely test feedback/review with students.
- Provide regular access to the campus computer labs to accommodate technology-based teaching-learning activities and computer based testing for up to 56 nursing students at any one time.
- Supply required resources needed to more adequately guide/assist students in the effective and timely use of the ATI predictive testing modules.
- Implement the proposed nursing department/program space plan within two years (2010).

Recommendations:

CCR 1425.1 and 1426: Faculty and Curriculum:

- Continue to strengthen faculty knowledge in the use of ATI testing across the curriculum.
- Refine ATI test scheduling within the program so it is aligned more closely with program course content and more accurately measures student mastery of course content/nursing knowledge in preparation for the NCLEX exam.

CCR 1429 (c) LVN 30 Unit Option:

- Revise university catalog, website and program materials to more clearly state admission and program completion requirements for this program option.

**CONSULTANT APPROVAL REPORT FOR
CONTINUING APPROVAL REVIEW**

EDP-S-08 (Rev. 06/04)

Ruth Ann Terry, MPH, RN
Executive Officer
(916) 322-3350
(626) 575-7080**PROGRAM NAME: Dominican University of California
November 5-7, 2008**

APPROVAL CRITERIA			
	Compliance	Non-Compliance	COMMENTS
SECTION 1: PROGRAM DIRECTOR / ASSISTANT			
DIRECTOR			
SECTION 1425(b) The registered nurse director of the program shall have:	X		<p>Ms. Mary Ann Haeuser, MSN, RN has served as the Program Director since 8/11/05. Ms. Haeuser also serves as the undergraduate program director for the department. Ms. Haeuser reports to the department chair, Dr. Luanne Linnard-Palmer.</p> <p>Ms. Haeuser completed her MSN in 1990 at UCSF.</p> <p>Ms. Haeuser was appointed the program AD in October 2000 and the program director in 2005.</p> <p>Ms. Haeuser teaches 6 units each term. Her areas of specialty include medical surgical nursing & geriatrics.</p>
(1) A Master's or higher degree from an accredited college or university which includes course work in nursing, education or administration;	X		
(2) A minimum of one year's experience in an administrative position;	X		
(3) A minimum of two year's experience teaching in pre- or post-licensure nursing programs;	X		
(4) At least one year's experience as a registered nurse providing direct patient care; or	X		
(5) Equivalent experience and/or education as determined by the board.	N/A		<p>Dr. Luanne Linnard-Palmer has served as the program's Assistant Director since 8/11/05. Dr. Palmer is also the Nursing Department Chair. She reports to the area dean Dr. Nelson.</p> <p>SS-App E – includes DUofC job descriptions for the department chair and the two designated undergraduate co-director positions. Specific job descriptions for program director and AD are to be developed to more clearly delineate administrative responsibilities within the program for the director and assistant director.</p>
SECTION 1425(c) The registered nurse assistant director shall meet the education requirements set forth in subsections (b)(1) above and the experience requirements set forth in subsections (b)(3) and (b)(4) above or such experience as the board determines to be equivalent.	X		

APPROVAL CRITERIA			
	Compliance	Non-Compliance	COMMENTS
SECTION 1424(e) A sufficient period of time shall be set aside, by the institution, exclusively for the use of the director or his or her designee in the administration of the program.	X		Ms. Haeuser is assigned 50% release time to administer the program as the BRN approved program director. Some administrative functions are completed by the department chair, Dr. Linnard-Palmer.
SECTION 1424(f) The program shall have a registered nurse faculty member who is knowledgeable and current regarding the program and the policies and procedures by which it is administered and who can perform the director's duties in the person's absence.	X		Dr. Linnard-Palmer, MSN UCSF 1991; Ed.D UCSF 1996. Ms. Linnard-Palmer has 75% release time as the department chair. She also has a teaching load each term.
SECTION 2: TOTAL PROGRAM EVALUATION			
SECTION 1424(b) The policies and procedures by which the program is administered shall be in writing, shall reflect the philosophy and objectives of the program, and shall be available to all students.	X		Refer to SHB/FHB; university catalog and student recruitment materials for evidence. <u>Annual Attrition Average:</u> About 6-11% over the past five years. <u>Annual NCLEX Pass Rates:</u> 81.08-92.16% 2004-2008 Average: 85.0% for period of July'04-Sept '08.
(1) The nursing program shall have a written plan for evaluation of the total program, including admission and selection procedures, attrition and retention of students, and performance of graduates in meeting community needs.	X		Written total program evaluation plan is to be revised. Evidence in the exhibits reflects ongoing evaluation of all aspects of the program. Evaluation includes participation in a national benchmarking of various aspects of the program as included in SS-Appendix E.
SECTION 1428(b) The program shall have a procedure for resolving student grievances.	X		Evidence in SHB and university catalog.
SECTION 3: SUFFICIENCY OF RESOURCES			
SECTION 1424(d) The program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment to achieve the program's objectives.		X	Enrollment figures are as follows: 200 pre-nursing students; 56 in-coming second semester students nursing class; 128 junior level third year and 90 fourth year students totaling 274 enrolled in the program and 200 in pre-nursing. Nursing department is supported by 1.5 FTE administrative/clerical support staff. Noncompliance: Insufficient resources to adequately achieve program objectives. Please refer to the attached summary report of findings for specific details.
SECTION 4: PROGRAM ADMINISTRATION AND FACULTY QUALIFICATIONS			

APPROVAL CRITERIA

APPROVAL CRITERIA			
	Compliance	Non-Compliance	COMMENTS
SECTION 1425 A program shall report to the board all changes in faculty including changes in teaching areas, prior to employment of or within 30 days after termination of employment of a faculty member. Such changes shall be reported on forms provided by the board.	X		See summary findings related to timely submission and record keeping.
Faculty members shall possess the following qualifications: SECTION 1425(a) A nurse faculty member appointed on or after the effective date of these regulations shall hold a valid, active license issued by the board.	X		Thirteen full time and 31 part time faculty. Full Time faculty serves as course leads and faculty of record.
SECTION 1424(g) The faculty shall have the primary responsibility for developing policies and procedures, planning, organizing, implementing and evaluating all aspects of the program.	X		Validated by the exhibit evidence.
SECTION 1424(h) The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas of nursing listed in Section 1426 who shall be responsible for the educational program in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned.	X		Eleven of the thirteen hold doctorate degrees; the remainder of the full time faculty holds master's degrees. Nine of the thirteen full time faculty teach 100%. All 31 of the part time faculty are assistant instructors or instructors and function under the direction of the faculty of record. <u>Content Experts:</u> Geri: M. Haeuser, I. Sheets M/S: M. Fink, O. Catolico, D. Daunt MH/Psych: C. Campbell, L. Kania OB: K. Beebe Peds: V. Ruth
SECTION 1424(j) The assistant director shall function under the supervision of the director. Assistant instructors and clinical teaching assistants shall function under the supervision of an instructor.	X		Dr. Linnard-Palmer has served as AD since August 2005 and is responsible for select administrative functions within the program as well as various department chair administrative functions. SS-App E.
SECTION 1425(d) An instructor shall meet the following requirements: (1) Those set forth in subsections (b)(1) and (b)(4) above; and (2) Completion of at least one year's experience teaching courses related to nursing or a course which includes practice in teaching nursing.	X X X		Per BRN faculty approval forms. Per BRN faculty approval forms. Per BRN faculty approval forms.

APPROVAL CRITERIA			
	Compliance	Non-Compliance	COMMENTS
<p>SECTION 1425(e) An assistant instructor shall have:</p> <p>(1) A baccalaureate degree from an accredited college which shall include courses in nursing, or in natural, behavioral or social sciences relevant to nursing practice;</p> <p>(2) At least one year's continuous, full-time experience in direct patient care practice as a registered nurse.</p> <p>SECTION 1425(f) A clinical teaching assistant shall have had at least one year's experience, within the previous five years, as a registered nurse providing direct patient care.</p>	X		31 regular part time faculty are used by the program. Per BRN faculty approval forms.
	X		Per BRN faculty approval forms.
	X		Additional RNs staff the skills and simulation labs as classified employees. Leslie Crane, RN Sim Lab Staff; also clinical faculty Lu Sweeny, RN, Simulation Ctr. Director; .75 FTE Miriam Edleman, RN, Skills Lab Director; 1 FTE Shurray Medina, Clinical Resources Coordinator; .5 FTE
<p>Section 5: CURRICULUM</p> <p>SECTION 1424(a) There shall be a written statement of philosophy and objectives which serves as a basis for curriculum structure. Such statement shall take into consideration the individual differences of students, including their cultural and ethnic background, learning styles, goals and support systems. It shall also take into consideration the concepts of nursing and man in terms of nursing activities, the environment, the health-illness continuum, and relevant knowledge from related disciplines.</p>			
	X		Included in course syllabi and SHB. The program philosophy and student learning outcomes (SLOs)/objectives are clearly integrated throughout the program.

APPROVAL CRITERIA

APPROVAL CRITERIA			
	Compliance	Non-Compliance	COMMENTS
SECTION 1425.1(a) Each faculty member shall assume responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content.	X		Full time faculty responsible for coordinating consistent implementation of all aspects of the curriculum with total faculty and part time faculty within assigned courses. Refer to SS-App F. <u>Recommendation:</u> ➤ Continue to strengthen faculty knowledge in the use of ATI testing across the curriculum. ➤ Refine ATI test scheduling within the program so it is aligned more closely with program course content and more accurately measures student mastery of course content/nursing knowledge in preparation for the NCLEX exam.
SECTION 1426(a) The curriculum of a nursing program shall be that set forth in this section. A program's curriculum shall not be implemented or revised until it has been approved by the board.	X		Per approved CRL/TCP forms; last curriculum change May 2008.
SECTION 1426(b) The curriculum shall reflect a unifying theme, which includes the nursing process as defined by the faculty, and shall be designed so that a nurse who completes the program will have the knowledge and skills necessary to function in accordance with the minimum standards for competency set forth in Title 16, California Code of Regulations, section 1443.5.	X		Nursing process serves as unifying theme; sub-concepts/threads include: - communication - leadership/management - professional role - research - teaching/learning
SECTION 1426(c) The curriculum shall consist of not less than fifty-eight (58) semester units, or eighty-seven (87) quarter units, which shall include at least the following number at least the following number of units in the specified course areas:	X		Per approved CRL/TCP forms.
(1) Art and science of nursing, thirty-six (36) semester units or fifty-four (54) quarter units, of which eighteen (18) semester or twenty-seven (27) quarter units will be in theory and eighteen (18) semester or twenty-seven (27) quarter units will be in clinical practice.	X		Nursing Theory: 26.5 units Nursing Clinical: 22.5 units Total Nursing: 49.0 units
(2) Communication skills, six (6) semester or nine (9) quarter units. Communication skills shall include principles of verbal, written and group communication.	X		Communication: 6 units Sciences: 20 units Total CRL: 75 units
(3) Related natural, behavioral and social sciences, sixteen (16) semester or twenty-four (24) quarter units.	X		Other Degree: 51 units includes the required PHN certification content as described in CCR 1491 and documented on the designated BRN form. Total Degree: 126 units

APPROVAL CRITERIA			
	Compliance	Non-Compliance	COMMENTS
SECTION 1426(d) Theory and clinical practice shall be concurrent in the following nursing areas: medical-surgical, maternal/child, mental health, psychiatric nursing and geriatrics. Instruction will be given in, but not limited to, the following: personal hygiene, human sexuality, client abuse, cultural diversity, nutrition (including therapeutic aspects), pharmacology, legal, social and ethical aspects of nursing, nursing leadership and management.	X		Course syllabi/schedules provide evidence.
SECTION 1426(e) The following shall be integrated throughout the entire nursing curriculum.	X		Per course syllabi.
(1) nursing process;	X		Same as above.
(2) basic intervention skills in preventive, remedial, supportive and rehabilitative nursing;	X		Same as above.
(3) physical, behavioral and social aspects of human development from birth through all age levels;	X		Same as above.
(4) the knowledge and skills required to develop collegial relationships with health care providers from other disciplines;	X		Per course syllabi/university catalog.
(5) communication skills including principles of verbal, written and group communications;	X		Same as above.
(6) natural sciences including human anatomy, physiology and microbiology; and	X		Same as above.
(7) related behavioral and social sciences with emphasis on societal and cultural patterns, human development, and behavior relevant to health-illness.	X		Same as above.
SECTION 1426(f) The course of instruction shall be presented in semester or quarter units under the following formula:	X		Per approved CRL/TCP forms.
(1) One (1) hour of instruction in theory each week throughout a semester or quarter equals one (1) unit.	X		Per approved CRL/TCP forms and university catalog.
(2) Three (3) hours of clinical practice each week throughout a semester or quarter equals one (1) unit.	X		Same as above.

APPROVAL CRITERIA

APPROVAL CRITERIA			
	Compliance	Non-Compliance	COMMENTS
LICENSED VOCATIONAL NURSES AND OTHER HEALTH CARE WORKERS: SECTION 1429(a) An applicant who is licensed in California as a vocational nurse is eligible to apply for licensure as a registered nurse if such applicant has successfully completed the courses prescribed below and meets all the other requirements set forth in Section 2736 of the Code. Such applicant shall submit evidence to the board, including a transcript of successful completion of the requirements set forth in subsection (c) and of successful completion or challenge of courses in physiology and microbiology comparable to such courses required for licensure as a registered nurse. SECTION 1429(b) The school shall offer objective counseling of this option and evaluate each licensed vocational nurse applicant for admission to its registered nursing program on an individual basis. A school's determination of the prerequisite courses required of a licensed vocational nurse applicant shall be based on an analysis of each applicant's academic deficiencies, irrespective of the time such courses were taken. SECTION 1429(c) The additional education required of licensed vocational nurse applicants shall not exceed a maximum of thirty (30) semester or forty-five (45) quarter units. Courses required for vocational nurse licensure do not count toward fulfillment of the additional education requirement. However, other courses comparable to those required for licensure as a registered nurse, as specified in Section 1426, may be counted toward fulfillment of the additional education requirement.	X		Refer to university catalog.
	X		The department has a full time program/pre-clinical advisor housed within the nursing department. Full time nursing faculty is responsible for formal academic advising of nursing students relative to progression within the program.
	X		<u>Recommendation:</u> ➤ Revise university catalog, website, and program materials to more clearly state admission/program completion requirements for this program option. <u>LVN 30 U option: Totals 30 units</u> ➤ Bio 2600 + 3600: 8 units ➤ Nursing units: 22 units

APPROVAL CRITERIA			
	Compliance	Non-Compliance	COMMENTS
Nursing courses shall be taken in an accredited school and shall be beyond courses equivalent to the first year of professional nursing courses. The nursing content shall include nursing intervention in acute, preventive, remedial, supportive, rehabilitative and teaching aspects of nursing. Theory and courses with concurrent clinical practice shall include advanced medical-surgical, mental health, psychiatric nursing and geriatric nursing.	X		Integrated throughout the program as evidenced by course syllabi.
The nursing content shall include the basic standards for competent performance prescribed in Section 1443.5 of these regulations.	X		Evidence includes course syllabi content/objectives, interviews with students and faculty.
TRANSFERS AND CHALLENGES:			
SECTION 2786.6 The board shall deny the application for approval made by, and shall revoke the approval given to, any school of nursing which:			
SECTION 2786.6(a) Does not give to student applicants credit, in the field of nursing, for previous education and the opportunity to obtain credit for other acquired knowledge by the use of challenge examinations or other methods of evaluation; or	X		Evidence provided by college catalogue/program policies. Consistent with program progression criteria, a score of 73% is needed to pass a course challenge examination.
SECTION 2786.6(b) Is operated by a community college and discriminates against an applicant for admission to a school solely on the grounds that the applicant is seeking to fulfill the units of nursing required by Section 2736.6.	X		Dominican is a four year WASC approved university as well as holding CCNE accreditation.
SECTION 6: CLINICAL FACILITIES / CLINICAL EXPERIENCES			
SECTION 1425.1 (b) The registered nurse faculty members shall be responsible for clinical supervision only of those students enrolled in the registered nursing program.	X		The total 22.5 units of clinical experience occur in an excellent variety of diverse clinical settings. Clinical hours include 112.5 hours of each specialty-Maternity, Pediatrics, Psych/Mental Health, Community Health. Additionally, there are 475.5 hours of Medical-Surgical nursing and 90 hours of Geriatrics.

APPROVAL CRITERIA			
	Compliance	Non-Compliance	COMMENTS
SECTION 1424(i) When non-faculty individuals participate in the instruction and supervision of students obtaining clinical experience, their responsibilities shall be described in writing and kept on file by the nursing program.	X		RN staff preceptors are the only non-faculty used by the program. Requisite documentation is on file in the nursing department.
SECTION 1427(a) A nursing program shall not utilize agencies and/or community facilities for clinical experience without prior approval by the board. Each program must submit evidence that it has complied with the requirements of subdivisions (b) and (c) of this section and the policies outlined by the board.	X		Requisite approvals on file.
SECTION 1427(b) A program which utilizes agencies and/or community facilities for clinical experience shall maintain written objectives for student learning in such facilities, stated in measurable performance terms, and shall assign students only to facilities which can provide the experience necessary to meet those objectives.	X		Evidence provided by course syllabi.
SECTION 1427(c) Each such program shall maintain written agreements with such facilities and such agreements shall include the following:	X		SS-Appendix H.
(1) Assurance of the availability and appropriateness of the learning environment in relation to the program's written objectives;	X		SS-Appendix H.
(2) Provision for orientation of faculty and students;	X		SS-Appendix H.
(3) A specification of the responsibilities and authority of the facility's staff as related to the program and to the educational experience of the students;	X		SS-Appendix H.
(4) Assurance that staff is adequate in number and quality to insure safe and continuous health care services to the patients;	X		SS-Appendix H.
(5) Provisions for continuing communication between the facility and the program; and	X		SS-Appendix H.
(6) A description of the responsibilities of faculty assigned to the facility utilized by the program.	X		SS-Appendix H.

APPROVAL CRITERIA			
	Compliance	Non-Compliance	COMMENTS
SECTION 1424(k) The student/teacher ratio in the clinical setting shall be based on the following criteria: 1) acuity of patient needs; 2) objectives of the learning experience; 3) class level of the students; 4) geographic placement of students; 5) teaching methods; and 6) Requirements established by the clinical agency.	X		Ratios vary by level & learning activities throughout the program as follows: Theory classes: 1:56 Sophomore clinical: 1:8-9 Skills labs: 1:10 Junior level: 1:8-9 Senior Level: 1:12 Preceptorships: 1:12 for faculty coordination
SECTION 1428(c) Tools used to evaluate students' progress and performance and clinical learning experiences shall be stated in measurable terms directly related to course objectives.	X		Included in course syllabi and FHB.
SECTION 7: STUDENT PARTICIPATION SECTION 1428(a) Students shall be provided the opportunity to participate with the faculty in the identification of policies and procedures related to students including but not limited to: (1) Philosophy and objectives; (2) Clinical facilities; (3) Learning experience; and (4) Curriculum, instruction and evaluation of the various aspects of the program.	X X X X X		Students participate in the four standing committees (Admission/Retention, Curriculum, Evaluation, and Learning Resources). Validated by exhibit evidence.

Sections and Related BRN Approval Rules and Regulations

Section	Rules and Regulations
Section 1: Program Director and Assistant Director	Section 1424 (e); 1424(f); 1425(b) 1 – 5; 1425(c);
Section 2: Total Program Evaluation	Section 1424(b); 1424(b)(1); 1428(b)
Section 3: Sufficiency of Resources	1424(d)
Section 4: Program Administration	Section 1424(g); 1424(h); 1424(j); 1425; 1425(a); 1425(d); 1425(e); 1425(f);

and Faculty Qualifications	
Section 5: Curriculum	Section 1424(a); 1425; 1425.1(a); 1426(a); 1426(b); 1426(c); 1426(d); 1426(e); 1426(f); 1429(a); 1429(b); 1429(c); 2786.6; 2786.6(a); 2786.6(b)
Section 6: Clinical Facilities and Clinical Experiences	Section 1424(i); 1424(k); 1425.1 (b); 1427(a); 1427(b); 1427(c); 1428(c);
Section 7: Student Participation	Section 1428(a)

NCLEX PASS RATES FIRST TIME CANDIDATES

2001-2009

Dominican University of California

	JUL-SEP		OCT-DEC		JAN-MAR		APR-JUN		ANNUAL RATE	
2001 - 2002	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	16	11 68.75%	3	2 66.67%	11	6 54.55%	8	3 37.50%	38	22 57.89%
2002 - 2003	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	21	16 76.19%	6	5 83.33%	12	8 66.67%	2	2 100.00%	41	31 75.61%
2003 - 2004	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	18	9 50.00%	5	3 60.00%	13	6 46.15%	11	10 90.91%	47	28 59.57%
2004 - 2005	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	10	7 70.00%	1	0 0.00%	13	13 100.00%	11	9 81.82%	35	29 82.86%
2005 - 2006	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	16	16 100.00%	1	1 100.00%	18	16 88.89%	16	14 87.50%	51	47 92.16%
2006 - 2007	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	11	8 72.73%	0	0	35	33 94.29%	13	12 92.31%	59	53 89.83%
2007 - 2008	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	29	22 75.86%	4	3 75.00%	26	23 88.46%	15	12 80.00%	74	60 81.08%
2008 - 2009	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	35	27 77.14%	4	4 100.00%	0	0	0	0	39	31 79.49%

Monday, February 02, 2009

Source: NCSBN GI-G6 Reports

G:\NEC\Access\nclx.mdb



**DOMINICAN
UNIVERSITY**
of CALIFORNIA
1890

This place changes people.

Katie Daugherty

Nursing Education Consultant

Board of Registered Nursing

1625 North Market St, #N-217

Sacramento, California 95834

Dear Mrs. Daugherty,

This letter is in response to our November 2008 BRN accreditation site visit findings. We have attempted to address your concerns and offer a summary of our current efforts to remedy our nursing program's non-compliance status. We appreciate your in-depth review of our program, policies and processes, and welcome the opportunity to respond in writing prior to the presentation of your findings to the Education/Licensing Committee in March 2009.

Enclosed you will find:

1. A written response to the 9 areas of non-compliance and the 3 recommendations identified during your visit to our university.
2. A request to formally restructure our BRN Director and BRN Assistant Director organizational chart. (Form DP-P-03, 3.5.1)

Thank you for your consideration in this matter and we appreciate any feedback you may have for us during this response process.

Sincerely,

Dr. Luanne Linnard-Palmer RN

Professor and Chair

Department of Nursing

Dominican University of California

Luanne Linnard-Palmer
1/26/09

Non-Compliances CCR 1424: Program Administration and Sufficiency of Resources: Insufficient resources to adequately achieve program objectives:

1. Revise written program evaluation plan to reflect all of the aspects of program evaluation and data collection/analysis:

Response: A newly revised method of tracking and communicating program evaluation has been created and has recently been implemented. Attached is a copy of the table that has been developed to collect and summarize data, identify tools used, report analysis and document outcomes. The table is still under development as we just began using the table in the later fall semester, 2008. At the conclusion of the 2008-2009 academic year, the completed evaluation table will be sent to you as our BRN Nursing Education Consultant, the Dean of Arts and Sciences, the DUC Assessment Director and the nursing faculty for review and revision.

2. Increase the percent of release time for the Program Director and Assistant Program Director(s) to adequately administer the pre-licensure nursing program:

Response: The members of the Nursing Executive Team have negotiated with Dean Martha Nelson to increase the annual release time allocated to the Department of Nursing. A total of 71 hours of release time will be distributed to ensure a high level of functioning of the nursing department's duties and services.

- a. At least 75% of the Chair's/BRN Director's time (9 units of administrative release time per semester) will be allocated to the delivery of the prelicensure program and 100% of the Undergraduate Assistant BRN Director's time (6 units of administrative release time each per semester) will be allocated to the delivery of the prelicensure program.
 - b. Advising units for all full time faculty equally 1 unit per academic year for a total of 10 units.
 - c. Faculty of Record Units for coordination of each sub-specialty theory course's adjunct clinical faculty group equally 1 unit per academic year for a total of 8 units.
 - d. Clinical coordination hours for setting up and overseeing the preceptorship program of NURS4200 Nursing Leadership. (Units allocation varies with size of class)
3. Increase the administrative/clerical support staff by at least .5 FTE to adequately meet the day to day support services need to students/faculty and ensure timely submission/complete recording keeping of required compliance documentation:

Response: Dean Marty Nelson approved the increase of administrative support by a .25 position for the spring of 2009. This increase will be evaluated at the end of the academic year for efficiency and effectiveness. If problems with day to day administrative and clerical support continue, a further increase will be secured for the next academic year. Furthermore, an evaluation of current departmental staff workload and tasks is being conducted to redistribute duties to appropriate personnel based on skill sets. Maximizing the use of front office student workers will also increase efficiency and an increase to 40 hours a week for student-staffed office and clerical support will also be implemented starting January 20th, 2009.

4. Fund/sustain funding for the proposed remediation/retention specialist position to meet student learning needs/minimize program attrition.

Response: Starting January 5th, 2009, DUC has hired a part time ATI Testing Remediation Specialist, Ms. Jean Snyder, MS, RN. This position has been created to support the faculty in mandating remediation for any student not achieving the desired proficiency level or testing average set for the students in each theory class. The remediation specialist funding has been secured through the summer of 2009. At that time, an evaluation of the effectiveness of the position and the appropriateness of the designated time will be reevaluated. If more time is needed, funding will be sought. The entire DUC nursing faculty unanimously supported the hiring of this specialist who will take the responsibility of following the student through the focused review and remediation activities, as well as working closely with the ATI testing company, to provide academic support for the at-risk students. The nursing faculty and administration believe that the implementation of a strong remediation program across the nursing curriculum will meet the students learning needs, and therefore will reduce attrition and support academic success for all students as they will be receiving 1:1 assistance early on.

5. Re-evaluate faculty and skills/simulation lab staff teaching loads given the significant increase in student enrollment/student learning needs:

Response: Simulation and skills staff workloads have been recently critiqued by Dean Martha Nelson and the Nursing Administrative team. In light of the recent opening of the Marin Regional Simulation lab, a cooperative endeavor sponsored by Marin General Hospital, San Rafael Kaiser Hospital, Novato Community Hospital, College of Marin and Dominican University of California, skills review and simulations are now being offered at two locations. This distribution of our simulation offering has allowed expansion of the service to all faculty across the curriculum. Fall 2008 academic user information demonstrates that the DUC simulation lab has not reduced its simulation offerings, but the regional center has expanded its offerings to more DUC nursing courses. Upon review of the spring 2009 simulation calendar, it is expected that the regional center will continue to increase the number of simulation days offered. This will allow more time for our simulation directors to collaborate with faculty to create new and challenging simulation scenarios.

Although the start-up simulation grant from the RGK Foundation has concluded, a new grant was funded by the Kaiser Regional Center beginning fall 2008. This two-year grant has allowed the nursing department to expand the student worker hours in the Sim Lab to assist the Directors in their work. The university devoted funds beyond the RGK Simulation grant to absorb the costs of the salaries for the DUC simulation lab directors and plans to continue to do so.

6. Ensure ongoing, easy access to properly working test analysis equipment/software for faculty use and to facilitate timely test feedback/review with students.

Response: After a thorough evaluation of several products, the University has committed resources to purchase a new soft-ware driven examination scoring machine from ScanTron. The new machine is going to be purchased this academic year and will

be housed in the library where students do not have access. All faculty will be given opportunities for in-services to learn the sophisticated product offerings including item analysis, content analysis, and statistical analysis to group scores. Nursing faculty were included in the review of the proposed product during December 2008, and supported the selection.

7. Provide regular access to campus computer labs to accommodate technology-based teaching-learning activities and computer based testing for up to 56 nursing students at any one time.

Response: After investigation by our Dean, Dr. Martha Nelson, it has been disclosed that our current classrooms that accommodate our large nursing classes do not have the electrical outlet capability to provide access for 56 computers (i.e., Guzman lecture hall, Library 207-208, and Meadowlands Assembly Hall). Furthermore, the older buildings where the nursing classes are held have thick walls and therefore do not have consistent wireless capabilities. This prohibits the solution of having all nursing students own a lap top that can be used for a simultaneous testing format. Therefore, our Director of IT, in collaboration with the Dean, have decided that the best plan is to have the Dean's Assistant work with the Chair of Nursing to prioritize the scheduling of the two existing library computer rooms and the two existing science building computer labs. The Dean's Assistant will meet with the Chair at the beginning of each semester and identify appropriate time blocks where the nursing courses across the curriculum can use the existing labs. Timely notification of the time blocks will be distributed to the students several weeks in advance as the time blocks needed will fall outside of the nursing theory courses' current schedule. Larger classes will require two labs conducting ATI testing simultaneously (up to 8 classes). All members of the nursing administration and the nursing department staff will fairly share the responsibility of proctoring the second testing site so both testing sessions can be conducted simultaneously with the plan to maximize test validity.

8. Supply required resources needed to more adequately guide/assist students in the effective and timely use of the ATI predictive testing modules.

Response: Content-specific ATI tests will only be scheduled after 90% of the course materials has been presented in the nursing theory courses. The pharmacology ATI will continue to be offered in the first semester of the senior year during week 6 and week 8 as the students were prepared to take this test over the course of the previous 3 semesters. (They receive their pharmacology ATI test preparation booklets in their sophomore year.) Furthermore, we will be offering a welcome orientation evening to new clinical nursing students during which they will be introduced to the ATI testing materials and departmental policies. This orientation was implemented this semester, spring 2009, as an option for new students but will be a mandatory orientation starting the fall academic semester in 2009.

9. Implement the proposed nursing department/program space plan within two years (2010).

- a. Response: The university administration is continuing to implement the proposed space improvement plan with a target date of implementation in the 2009-2010 academic year. The plan includes moving the Department of Nursing to a larger space that will

BOARD OF REGISTERED NURSING

JAN 29 2009

provide for a greater number of faculty to be closer together for greater collaboration and more scholarship. At the time of this writing, the plan is to move the Department of Nursing to the first floor of Guzman Hall where currently several university administration offices now reside.

Recommendations:

CCR 1425.1 and 1426: Faculty and Curriculum

1. Continue to strengthen faculty knowledge in the use of ATI testing across the curriculum.

Response: On Thursday January 15th the ATI company regional representatives conducted a four-hour faculty development workshop on several aspects of the ATI testing products currently being used across the nursing program. Mrs. Joy Burnard, our regional rep., and two other company remediation specialists presented remediation ideas, scoring parameters, grading suggestions and product reviews. They specifically addressed how faculty can best use the products to enhance learning in the nursing theory courses that implement the ATI content-specific exams and the Graduate Nurse Predictor exam. This theory enhancement will be the center of our commitment for increased student focused study in preparation for the NCLEX exam.

The recommendation related to the 30-unit option for LVN's is reflected in the new Dominican University of California 2008-2010 catalog. The prospective LVN students may transfer in units that were taken over 5 years before applying for the program.

Dominican University of California
School of Arts & Sciences
Department of Nursing
Total Evaluation

	Tools Used	Patterns/Trends	Faculty Analysis	Outcome of Analysis	Action
EBI:					
Student Exit Survey:					
Anchor SLO:					
Disqualifications Data:					
Admission Data:					
Attrition Rates & Patterns:					

NCLEX Scores:						
Faculty Student Forum:						
Student Issues/Complaints:						
GNP Scores:						
Pharmacology ATI Scores:						

BOARD OF REGISTERED NURSING
JAN 29 2009

BOARD OF REGISTERED NURSING
Education/Licensing Committee
Agenda Item Summary

AGENDA ITEM: 10.2.2

DATE: March 19, 2009

ACTION REQUESTED: Continue/ not continue approval for Western University of Health Sciences: Entry Level Master's Program (WUHS)

REQUESTED BY: Badrieh Caraway, NEC

BACKGROUND: Patricia Callard RN, MSN, FNP is the Program director. She assumed the position in October 2007.

A continuing approval visit was conducted at Western University of Health Sciences: Entry Level Master's Program, on November 18- 19, 2008, by Badrieh Caraway, NEC, and Maria Bedroni, SNEC. The program was found to be in compliance with all the Board rules and regulations. Two recommendations were made: Section 1424(e) Administration and organization of the Nursing Program, and Section 1426(b) Curriculum.

No major changes have occurred since the last interim visit of 2004. Two minor curricular revisions have been implemented. However, major improvements have occurred in obtaining learning resources especially for the clinical skills laboratory and learning resources. The program's NCLEX pass rate ranged from 92.2%(2005) to the current of 94.5%(2007).

In the last four years the program, WUHS was the recipient of \$450,000 in grant funds. These funds have been used to buy simulators, to enhance student's learning. Faculty are planning to use the new high fidelity simulators to provide "real life" clinical scenarios in all content areas. This could lead to changes in the curriculum. In the past four years faculty are moving away from standard lecture to teaching and utilizing more active and interactive instructional methods. This has resulted in increased student retention and satisfaction.

The program was recently moved to a new building that houses the faculty offices and administrative staff. The program uses state of the art technology and faculty and students are well supported with computers, office spaces, library, and counseling services.

The WUHS ELM Program has strong administrative and community support.

NEXT STEP: Place on Board agenda

**FISCAL
IMPLICATION(S), IF ANY:** None

PERSON(S) TO CONTACT: Badrieh Caraway, MS, MEd, RN
Nursing Education Consultant
909-599-8720

**Western University of Health Sciences,
Entry Level Master Degree Nursing Program
Continue Approval Visit Dates: November 18, 19 2008**

Non Compliance(s): None

RECOMMENDATION(S):

Section 1424(e) Administration and organization of the Nursing Program

Increase the amount of administrative release time for the Director to meet the program's needs.

Section 1426(b) Curriculum

- Revise courses to reflect the unifying theme.
- Strengthen care plan and evaluation tools to provide clear expectations and to ensure consistency among all faculty in students' evaluation.

**CONSULTANT APPROVAL REPORT FOR
CONTINUING APPROVAL REVIEW**

EDP-S-08 (Rev..6/04)

WORK COPYRuth Ann Terry, MPH, RN
Executive Officer
(916) 322-3350
(626) 575-7080

PROGRAM NAME: Western University of Health Sciences: Entry Level Master Degree Nursing Program

DATES OF VISIT: November 18, 19, 2008

APPROVAL CRITERIA			WORK COPY
	Compliance	Non-Compliance	
SECTION 1: PROGRAM DIRECTOR / ASSISTANT			
DIRECTOR			
SECTION 1425(b) The registered nurse director of the program shall have:			Patricia Callard RN, MSN, FNP is the Program director. She assumed the position in October 2007
(1) A Master's or higher degree from an accredited college or university which includes course work in nursing, education or administration;	X		MSN Kent State University, OHIO, 1982
(2) A minimum of one year's experience in an administrative position;	X		Director of Educational Services at Trumbull Memorial Hospital, Warren, Ohio, from 1996-1999
(3) A minimum of two year's experience teaching in pre- or post-licensure nursing programs;	X		Instructor /Assistant Professor of Nursing at Western University of Health Sciences from October 2004 to present.
(4) At least one year's experience as a registered nurse providing direct patient care; or			Staff Nurse at Methodist Hospital Arcadia, CA from May 2005 to present.
(5) Equivalent experience and/or education as determined by the board.	NA		
SECTION 1425(c) The registered nurse assistant director shall meet the education requirements set forth in subsections (b)(1) above and the experience requirements set forth in subsections (b)(3) and (b)(4) above or such experience as the board determines to be equivalent.	X SS p		Marcia Luxenburg- Horowitz MSN, RN is the program Assistant Director since October 2007. MSN, Nursing Leadership/Management from the University of Fullerton in 2004. BSN University of Fullerton, 1994 Ms. Horowitzhas has Pediatric clinical experience at Pomona Valley Hospital from 11-99 to 2005.

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1424(e) A sufficient period of time shall be set aside, by the institution, exclusively for the use of the director or his or her designee in the administration of the program.	XSS P-30		Patricia Callard, RN, MSN has 50 % release time as Program Director for administrative functions; in addition she has had responsibility for theory and clinical CGN 6501-2 Nursing of adult and older adult. <u>Recommendation:</u> Increase the amount of administrative release time for director to meet the program needs.
SECTION 1424(f) The program shall have a registered nurse faculty member who is knowledgeable and current regarding the program and the policies and procedures by which it is administered and who can perform the director's duties in the person's absence.	X SS p-31		Marcia Luxenburg- Horowitz MSN, RN has 25% release time to perform administrative duties. Job description describes duties and responsibilities. The assistant director will assume the program director duties in her/his absence.
SECTN 2: TOTAL PROGRAM EVALUATION			
SECTION 1424(b) The policies and procedures by which the program is administered shall be in writing, shall reflect the philosophy and objectives of the program, and shall be available to all students.	X		The policies and procedures are in place at the Western University of Health Sciences (WUHS) College of Graduate Nursing (CGN) Student Catalog 2008-2009. In Fall 2007, the program's admission procedure was changed to require the Health Science Reasoning Exam (HSRE) with remediation for applicants with low scores.
(1) The nursing program shall have a written plan for evaluation of the total program, including admission and selection procedures, attrition and retention of students, and performance of graduates in meeting community needs.	X		Program evaluation is an ongoing process at WUHS. The College utilizes comprehensive on-line program to monitor curricular effectiveness, faculty effectiveness, clinical experiences/sites, and learning activities for each course each semester. The College Advisory Board meets-semi- annually. For the past three years
SECTION 1428(b) The program shall have a procedure for resolving student grievances.	X		, NCLEX scores for the first time candidates are 2005-2006 92.11% 2006-2007 72.97% and 20007-2008 92.68%. For the same time period the attrition rate are 2004 20.45%2005 4.88%20068.51%2007 0%.

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 3: SUFFICIENCY OF RESOURCES <p>SECTION 1424(d) The program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment to achieve the program's objectives.</p>	X		<p>In the last four years through three generous foundation grants over \$450,000 have been dedicated to student learning resources.</p> <p><u>Learning Skills Lab/ Resources:</u> The College now has a state of the art simulation lab with five high fidelity manikins, faculty training CAI programs, which promote high level interactive learning.</p> <p>The Skills Lab Coordinator oversees a clinical lab instructor and utilizes a MSNE staff person to assist with inventory and set up. Three full -time faculty have gained advanced expertise in incorporating simulation into Med/ Surg, OB, and Pediatrics.</p> <p><u>Faculty :</u> Five new faculty have been hired since the last BRN visit who teaching full or part time for the MSNE program. One Medical_ Surgical position has remained unfilled; however, active recruitment is ongoing to fill this position.</p> <p>The College has approved to secure additional 1.5 faculty for the 2008-2009 academic years.</p> <p><u>Space:</u> If program expands additional classrooms will be needed.</p>
SECTION 4: PROGRAM ADMINISTRATION AND FACULTY QUALIFICATIONS <p>SECTION 1425 A programs shall report to the board all changes in faculty including changes in teaching areas, prior to employment of or within 30 days after termination of employment of a faculty member. Such changes shall be reported on forms provided by the board.</p> <p>Faculty members shall possess the following qualifications: SECTION 1425(a) A nurse faculty member appointed on or after the effective date of these regulations shall hold a valid, active license issued by the board.</p> <p>SECTION 1424(g) The faculty shall have the primary responsibility for developing policies and procedures, planning, organizing, implementing and evaluating all aspects of the program.</p>	<p>X</p> <p>X</p>		<p>During approval visit the faculty approval forms and resignation forms were updated. All Faculty involved in teaching Medical _Surgical needs remediation for Geriatrics. Faculty are currently completing Geriatric remediation plan. Program director will submit the completed remediation form to the NEC for approval.</p> <p>The self –study addresses the faculty responsibility for developing policies & procedures as well as revision of the faculty handbook. The College handbook follows university policies.</p>

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1424(h) The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas of nursing listed in Section 1426 who shall be responsible for the educational program in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned.	X		<p>There are 5FT for MSNE program, and 11 PT adjunct faculty, which are primarily teaching in the clinical areas. The program hired one FT faculty in Medical_ Surgical which will be starting in January 2009. One out of the FT faculty is also responsible for the Community Health as a Lead instructor.</p> <p>Content Experts are: <u>Psychiatrics:</u> Lorri Clayton <u>Medical Surgical:</u> Patricia Callard <u>Pediatrics:</u> Marci Luxenburg- Horowitz, <u>Obstetrics:</u> Lisa Miklush, <u>Geriatrics:</u> Dawn Stone and Ellen Daroszewski</p>
SECTION 1424(j) The assistant director shall function under the supervision of the director. Assistant instructors and clinical teaching assistants shall function under the supervision of an instructor.	X		All requirements are met for the assistant director, Instructor, and assistant instructor. The program does not have any clinical teaching assistant.
SECTION 1425(d) An instructor shall meet the following requirements: (1) Those set forth in subsections (b)(1) and (b)(4) above; and (2) Completion of at least one year's experience teaching courses related to nursing or a course which includes practice in teaching nursing.	X X		The are twelve Instructors and all meet the BRN requirements:
SECTION 1425(e) An assistant instructor shall have: (1) A baccalaureate degree from an accredited college which shall include courses in nursing, or in natural, behavioral or social sciences relevant to nursing practice; (2) At least one year's continuous, full-time experience in direct patient care practice as a registered nurse.	X		There are four Assistant Instructors and all meet the BRN requirements.

APPROVAL CRITERIA

	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1425(f) A clinical teaching assistant shall have had at least one year's experience, within the previous five years, as a registered nurse providing direct patient care.	N/A		The program does not have any clinical teaching assistant.
Section 5: CURRICULUM			
SECTION 1424(a) There shall be a written statement of philosophy and objectives which serves as a basis for curriculum structure. Such statement shall take into consideration the individual differences of students, including their cultural and ethnic background, learning styles, goals and support systems. It shall also take into consideration the concepts of nursing and man in terms of nursing activities, the environment, the health-illness continuum, and relevant knowledge from related disciplines.	X		Program Philosophy include acceptance of individual student's differences regarding ethnicity, gender, age, ability, sexual orientation and political beliefs. The philosophy includes statements about health, nursing, persons, educational beliefs, faculty/student relationships and the environment.
SECTION 1425.1(a) Each faculty member shall assume responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content.	X		Lead Faculty orient new faculty to the program, as well as to the individual course. All faculty are responsible to participate in curriculum planning through the committee structure and in the annual review and revision for selected course modules.
SECTION 1426(a) The curriculum of a nursing program shall be that set forth in this section. A program's curriculum shall not be implemented or revised until it has been approved by the board.	X		The pre-licensure component of the ELM nursing program is 12 months long

APPROVAL CRITERIA

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1426(b) The curriculum shall reflect a unifying theme, which includes the nursing process as defined by the faculty, and shall be designed so that a nurse who completes the program will have the knowledge and skills necessary to function in accordance with the minimum standards for competency set forth in Title 16, California Code of Regulations, section 1443.5.	X		The program unifying theme are: professional nursing (Provider of care, communicator, advocate, teacher, manager, professional and researcher) nursing process, health/illness, man and environment. The unifying theme is not reflected in all courses.
SECTION 1426(c) The curriculum shall consist of not less than fifty-eight (58) semester units, or eighty-seven (87) quarter units, which shall include at least the following number at least the following number of units in the specified course areas:	X		<p><u>Recommendation:</u></p> <ul style="list-style-type: none"> Revise courses to reflect the unifying theme. Strengthen care plan and evaluation tools to clear expectations and to ensure consistency among all faculty in students evaluation. <p>EDP_P-06 form:</p> <ul style="list-style-type: none"> Content required for Licensure has a total of 76 units
(1) Art and science of nursing, thirty-six (36) semester units or fifty-four (54) quarter units, of which eighteen (18) semester or twenty-seven (27) quarter units will be in theory and eighteen (18) semester or twenty-seven (27) quarter units will be in clinical practice.	X		<ul style="list-style-type: none"> Nursing units are 52 units; Theory =32 units and Clinical= 20 units.
(2) Communication skills, six (6) semester or nine (9) quarter units. Communication skills shall include principles of verbal, written and group communication.	X		<ul style="list-style-type: none"> Communication = 6 units; English 1A, 2 units, Speech 101, 2 units, and communication, 2units.
(3) Related natural, behavioral and social sciences, sixteen (16) semester or twenty-four (24) quarter units.	X		<ul style="list-style-type: none"> Required Sciences= 18 units; Anatomy, 4 units; Physiology, 4 units; Microbiology, 4units; Sociology, 3 units; and Psychology, 3 units.
SECTION 1426(d) Theory and clinical practice shall be concurrent in the following nursing areas: medical-surgical, maternal/child, mental health, psychiatric nursing and geriatrics. Instruction will be given in, but not limited to, the following: personal hygiene, human sexuality, client abuse, cultural diversity, nutrition (including therapeutic aspects), pharmacology, legal, social and ethical aspects of nursing, nursing leadership and management.	X		All theory and clinical practices are concurrent.
SECTION 1426(e) The following shall be integrated throughout the entire nursing curriculum.			

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
<p>(1) nursing process;</p> <p>(2) basic intervention skills in preventive, remedial, supportive and rehabilitative nursing;</p> <p>(3) physical, behavioral and social aspects of human development from birth through all age levels;</p> <p>(4) the knowledge and skills required to develop collegial relationships with health care providers from other disciplines;</p> <p>(5) communication skills including principles of verbal, written and group communications;</p> <p>(6) natural sciences including human anatomy, physiology and microbiology; and</p> <p>(7) related behavioral and social sciences with emphasis on societal and cultural patterns, human development, and behavior relevant to health-illness.</p>	X		All elements were integrated and were reflected in course syllabi.
	X		
	X		
	X		
<p>SECTION 1426(f) The course of instruction shall be presented in semester or quarter units under the following formula:</p> <p>(1) One (1) hour of instruction in theory each week throughout a semester or quarter equals one (1) unit.</p> <p>(2) Three (3) hours of clinical practice each week throughout a semester or quarter equals one (1) unit.</p>	X		<p>The Pre-Licensure component of the ELM program is presented in four academic semesters. A semester is 15 weeks long. The third semester courses (Obstetrics, Pediatrics , and Geriatrics) run for 7.5 weeks</p> <p>E-DP-P_05 form; Class schedule compressed 18 weeks to 15 weeks semester.</p> <p>1 unit= 1 hour of theory</p> <p>1 unit= 3 hours of clinical.</p>
<p>LICENSED VOCATIONAL NURSES AND OTHER HEALTH CARE WORKERS:</p> <p>SECTION 1429(a) An applicant who is licensed in California as a vocational nurse is eligible to apply for licensure as a registered nurse if such applicant has successfully completed the courses prescribed below and meets all the other requirements set forth in Section 2736 of the Code. Such applicant shall submit evidence to the board, including a transcript of successful completion of the requirements set forth in subsection (c) and of successful completion or challenge of courses in physiology and microbiology comparable to such courses required for licensure as a registered nurse.</p>	N/A		

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1429(b) The school shall offer objective counseling of this option and evaluate each licensed vocational nurse applicant for admission to its registered nursing program on an individual basis. A school's determination of the prerequisite courses required of a licensed vocational nurse applicant shall be based on an analysis of each applicant's academic deficiencies, irrespective of the time such courses were taken.	X		
SECTION 1429(c) The additional education required of licensed vocational nurse applicants shall not exceed a maximum of thirty (30) semester or forty-five (45) quarter units. Courses required for vocational nurse licensure do not count toward fulfillment of the additional education requirement. However, other courses comparable to those required for licensure as a registered nurse, as specified in Section 1426, may be counted toward fulfillment of the additional education requirement. Nursing courses shall be taken in an accredited school and shall be beyond courses equivalent to the first year of professional nursing courses. The nursing content shall include nursing intervention in acute, preventive, remedial, supportive, rehabilitative and teaching aspects of nursing. Theory and courses with concurrent clinical practice shall include advanced medical-surgical, mental health, psychiatric nursing and geriatric nursing. The nursing content shall include the basic standards for competent performance prescribed in Section 1443.5 of these regulations.	X		
TRANSFERS AND CHALLENGES: SECTION 2786.6 The board shall deny the application for approval made by, and shall revoke the approval given to, any school of nursing which: SECTION 2786.6(a) Does not give to student applicants credit, in the field of nursing, for previous education and the opportunity to obtain credit for other acquired knowledge by the use of challenge examinations or other methods of evaluation; or	X X		Challenge policy is in place for students to challenge courses. The program uses University policy for transfer credits for prior education.

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 2786.6(b) Is operated by a community college and discriminates against an applicant for admission to a school solely on the grounds that the applicant is seeking to fulfill the units of nursing required by Section 2736.6.	X		
SECTION 6: CLINICAL FACILITIES / CLINICAL EXPERIENCES			
SECTION 1425.1 (b) The registered nurse faculty members shall be responsible for clinical supervision only of those students enrolled in the registered nursing program.	X		
SECTION 1424(i) When non-faculty individuals participate in the instruction and supervision of students obtaining clinical experience, their responsibilities shall be described in writing and kept on file by the nursing program.	X		All preceptors' files are current. Clinical adjuncts are hired to maintain a clinical faculty to student ratio of 1:8 or 1:10.
SECTION 1427(a) A nursing program shall not utilize agencies and/or community facilities for clinical experience without prior approval by the board. Each program must submit evidence that it has complied with the requirements of subdivisions (b) and (c) of this section and the policies outlined by the board.	X		All agencies meet Board of Registered Nursing requirements.
SECTION 1427(b) A program which utilizes agencies and/or community facilities for clinical experience shall maintain written objectives for student learning in such facilities, stated in measurable performance terms, and shall assign students only to facilities which can provide the experience necessary to meet those objectives.	X		Lead instructor is responsible for communication with facilities, including placement of student rotations
SECTION 1427(c) Each such program shall maintain written agreements with such facilities and such agreements shall include the following: (1) Assurance of the availability and appropriateness of the learning environment in relation to the program's written objectives; (2) Provision for orientation of faculty and students;	X		Contracts of facilities are signed and current.

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
<p>(3) A specification of the responsibilities and authority of the facility's staff as related to the program and to the educational experience of the students;</p> <p>(4) Assurance that staff is adequate in number and quality to insure safe and continuous health care services to the patients;</p> <p>(5) Provisions for continuing communication between the facility and the program; and</p> <p>(6) A description of the responsibilities of faculty assigned to the facility utilized by the program.</p> <p>(6) A description of the responsibilities of faculty assigned to the facility utilized by the program.</p>			Weekly formative evaluation and Summative evaluations are given at the end of the rotation. For students with difficulties, Notification of Unsatisfactory Clinical Performance is used to notify students and provide structured assistance.
<p>SECTION 1424(k) The student/teacher ratio in the clinical setting shall be based on the following criteria:</p> <p>1) acuity of patient needs;</p> <p>2) objectives of the learning experience;</p> <p>3) class level of the students;</p> <p>4) geographic placement of students;</p> <p>5) teaching methods; and</p> <p>6) requirements established by the clinical agency.</p>	X		Ratio of 1 faculty: 10 students (1:10) is used in the first three semesters and 1:12 in the fourth semester.
<p>SECTION 1428(c) Tools used to evaluate students' progress and performance and clinical learning experiences shall be stated in measurable terms directly related to course objectives.</p>	X		
<p>SECTION 7: STUDENT PARTICIPATION</p> <p>SECTION 1428(a) Students shall be provided the opportunity to participate with the faculty in the identification of policies and procedures related to students including but not limited to:</p> <p>(1) Philosophy and objectives;</p> <p>(2) Clinical facilities;</p> <p>(3) Learning experience; and</p> <p>(4) Curriculum, instruction and evaluation of the various aspects of the program.</p>			Student representatives are elected and encouraged to attend program committee meetings. Students participate in the curriculum process by providing course, faculty, and clinical facilities evaluations of each course.

Sections and Related BRN Approval Rules and Regulations

Section	Rules and Regulations
Section 1: Program Director and Assistant Director	Section 1424 (e); 1424(f); 1425(b) 1 – 5; 1425(c);
Section 2: Total Program Evaluation	Section 1424(b); 1424(b)(1); 1428(b)
Section 3: Sufficiency of Resources	1424(d)
Section 4: Program Administration and Faculty Qualifications	Section 1424(g); 1424(h); 1424(j); 1425; 1425(a); 1425(d); 1425(e); 1425(f);
Section 5: Curriculum	Section 1424(a); 1425; 1425.1(a); 1426(a); 1426(b); 1426(c); 1426(d); 1426(e); 1426(f); 1429(a); 1429(b); 1429(c); 2786.6; 2786.6(a); 2786.6(b)
Section 6: Clinical Facilities and Clinical Experiences	Section 1424(i); 1424(k); 1425.1 (b); 1427(a); 1427(b); 1427(c); 1428(c);
Section 7: Student Participation	Section 1428(a)

NCLEX PASS RATES FIRST TIME CANDIDATES

2004-2009

Western University of Health Sciences

	JUL-SEP			OCT-DEC			JAN-MAR			APR-JUN			ANNUAL RATE		
	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>
2004 - 2005	0	0		0	0		0	0		0	0		0	0	
2005 - 2006	0	0		1	1	100.00%	37	34	91.89%	0	0		38	35	92.11%
2006 - 2007	0	0		2	1	50.00%	34	26	76.47%	1	0	0.00%	37	27	72.97%
2007 - 2008	1	1	100.00%	1	1	100.00%	36	34	94.44%	3	2	66.67%	41	38	92.68%
2008 - 2009	0	0		5	5	100.00%	0	0		0	0		5	5	100.00%

Monday, February 23, 2009

Source: NCSBN G1-G6 Reports

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BOARD OF REGISTERED NURSING
Education/Licensing Committee
Agenda Item Summary

AGENDA ITEM: 10.2.3

DATE: March 19, 2009

ACTION REQUESTED: Continue/Not Continue Approval for Antelope Valley Associate Degree Nursing Program. (AVC)

REQUESTED BY: Badrieh Caraway, NEC

BACKGROUND: Karen W. Cowell, PhD, RN is the Dean Health Sciences and Director since 4/1/2001.

A continuing approval visit was conducted on December 3- 4, 2008 at Antelope Valley Associate Degree Nursing program by Badrieh Caraway, NEC, and Carol Mackay, NEC. The program found to be in compliance with all the Board rules and regulations. Three recommendations were made: Section 1424(e) Program Director/Assistant Director, Section 1426(b) Curriculum, and Section 1424(d) Resources.

During the last four years the program has experienced a number of changes in several areas. The number of students increased from 136 in 2004 to 184 in 2007, therefore faculty also increased from 27 in 2004 to 33 in 2007. A major curriculum revision / implementation of Orem Self-Care model and utilization of ATI_TEAS for students' admission also occurred. The program's NCLEX pass rate from 2003-2007, ranged from 94.2%(2004) to the current of 87.5%.

In the last four years the program, AVC was the recipient of \$1,067,587 in grants from the California Community College Chancellor's Office. These funds have been used to support number of activities as stated in the report. The program constructed and furnished an auxiliary Skills Lab. with several high fidelity simulation mannequins unfortunately this has been under utilized. The recommendation made for a FT Simulation Lab position to coordinate faculty development, and to enhance integration of simulation into the curriculum.

The faculty development plan has been initiated. However, the assistant director/ department chair does not have adequate release time to meet the program's need, recommendation made to increase release time for assistant director/department chair and union negotiation is in progress.

The program has an extensive library holding and online access from any PC. There are number of remediation programs are in place to assist in student success.

The school attracts students from out of areas; such as Santa Clarita and Victor Valley, some travels long distance to attend this program.

The AVC ADN Program has a fine and long standing history of education, and a strong administrative and community support.

NEXT STEP:

Place on Board agenda

**FISCAL
IMPLICATION(S), IF ANY:**

None

PERSON(S) TO CONTACT:

Badrieh Caraway, MS, MEd, RN
Nursing Education Consultant
(909)-599-8720

REPORT OF FINDINGS

Antelope Valley College ADN Program
Continue Approval visit: December 3, 4 , 2008

RECOMMENDATION(S):

Section 1424(e) Administration and organization of the Nursing Program

Increase the amount of administrative release time for the Assistant Directors and the Assistant Director /Department Chair to meet the program's needs.

Section 1424(d) Resources

Consider a FT Simulation Lab position to coordinate faculty development, and to enhance integration of simulation into the curriculum.

Add a FT clerical position for the AND program.

Section 1426(b) Curriculum

Strengthen of nursing care plan and clinical evaluation tools to provide clear expectations and to ensure consistency among all faculty in student evaluation.

**CONSULTANT APPROVAL REPORT FOR
CONTINUING APPROVAL REVIEW**

EDP-S-08 (Rev..6/04)

WORK COPYRuth Ann Terry, MPH, RN
Executive Officer
(916) 322-3350
(626) 575-7080

PROGRAM NAME: Antelope Valley College Associate Degree Nursing

DATES OF VISIT: December 3, 4, 2008

APPROVAL CRITERIA			WORK COPY COMMENTS
	Compliance	Non-Compliance	
SECTION 1: PROGRAM DIRECTOR / ASSISTANT			
DIRECTOR			
SECTION 1425(b) The registered nurse director of the program shall have:			Karen W. Cowell RN, PhD Dean Health Sciences Director of Nursing. She assumed the position in April -1-2001.
(1) A Master's or higher degree from an accredited college or university which includes course work in nursing, education or administration;	X		Has MSN 1989 from Marymount University, Arlington, Virginia ;PhD1996 from University of Maryland, College Park, MD
(2) A minimum of one year's experience in an administrative position;	X		Assistant Director from 8/2000 to 3/2001 at Fredrick Community College , Fredrick, MD and mentored at AVC from 4/2001 to 6/2001 by outgoing Antelope Valley College (AVC)
(3) A minimum of two year's experience teaching in pre- or post-licensure nursing programs;	X		Instructor from 1993-2001 at Fredrick Community College.
(4) At least one year's experience as a registered nurse providing direct patient care; or			Staff nurse from 5/1996-3/2001 at Washington County Hospital
(5) Equivalent experience and/or education as determined by the board.	NA		

APPROVAL CRITERIA

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1425(c) The registered nurse assistant director shall meet the education requirements set forth in subsections (b)(1) above and the experience requirements set forth in subsections (b)(3) and (b)(4) above or such experience as the board determines to be equivalent.	X		<p>In July 2008, AVC began piloting an Assistant Director /Department Chair position, in addition to the already existing two Assistant Directors. The primary responsibility of the two Assistant Directors is to coordinate clinical placements. The Assistant Director/ Department Chair assists the program director to administer the AND program.</p> <p><u>Sandra Hughes</u> appointed in 9/2002; MN 2000 from University of Phoenix; Instructor at AVC since 1/2000; Staff nurse 1999-2000 Antelope Valley Hospital</p> <p><u>Linda Harmon</u> appointed in 8/20/2007; MSN from CSU, Dominguez Hills; Instructor at antelope Valley College since 2004; Staff RN 6/84 to 2005 Antelope Valley Hospital Emergency Department.</p> <p><u>Elizabeth Sunberg - Assistant Director/Department Chair-</u> appointed Department Chair in 07 /10/2008; MN 1978 from UCLA; Instructor at Antelope Valley College since 1978; Staff RN 1975 to 1978 at Lancaster Community Hospital.</p>
SECTION 1424(e) A sufficient period of time shall be set aside, by the institution, exclusively for the use of the director or his or her designee in the administration of the program.	X		<p>Dean /Director has a 12 month administrative position with 100% of release time. She is responsible for administering eight programs in addition to the RN program. Approximately 30% of her time is spent administering the RN program. The two Assistant Directors receive no release time. They each receive \$750 stipend for administrative work.</p> <p>The Assistant Director/ Department Chair position has 25% release time for administrative work.</p> <p><u>Recommendation:</u></p> <ul style="list-style-type: none"> • Increase the amount of administrative release time for the Assistant Directors and the Assistant Director /Department Chair to meet the program's needs.

APPROVAL CRITERIA

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1424(f) The program shall have a registered nurse faculty member who is knowledgeable and current regarding the program and the policies and procedures by which it is administered and who can perform the director's duties in the person's absence.	X		The Assistant Director /Department Chair can perform the program's administrative duties in the absence of the director. The other two Assistant Directors can also perform these duties, if required.
SECTN 2: TOTAL PROGRAM EVALUATION			
SECTION 1424(b) The policies and procedures by which the program is administered shall be in writing, shall reflect the philosophy and objectives of the program, and shall be available to all students.	X		The policies and procedures are available in the Antelope Valley College Catalog, and Student Hand Book 2008-2009. In Fall 2007, the program's admission procedure was changed to require the ATI-TEAS with remediation for applicants with low scores.
(1) The nursing program shall have a written plan for evaluation of the total program, including admission and selection procedures, attrition and retention of students, and performance of graduates in meeting community needs.	X		Program evaluation is an ongoing process at AVC. AVC's evaluation and planning committee meets semi-annually. For the past four years ,NCLEX scores for the first time candidates are 2005-2006 87.50%, 2006-2007 94.87%, 2007-2008 82.69%, 2008 and 2009 87.88%. For the same time period, the program attrition rate is 2005-2006 32.3%, 2006-2007 37.8%, and 2008-2009 45%. Contributing factor may include the addition of 11 new full time faculty from fall 2004-fall 2008.

APPROVAL CRITERIA

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1428(b) The program shall have a procedure for resolving student grievances.	X		

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
<p>SECTION 3: SUFFICIENCY OF RESOURCES</p> <p>SECTION 1424(d) The program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment to achieve the program's objectives.</p>	X		<p><u>Financial Resources:</u></p> <p>In the last four years the program, AVC was the recipient of \$1,067,587 in grants from the California Community College Chancellor's Office. These funds have been used to support The following activities:</p> <ul style="list-style-type: none"> • Increased program capacity to 150 generic students enrolled annually, with spaces saved for LVN-RN students each semester. • Hired additional faculty including a Skills Lab Coordinator. • Instituted ATI_TEAS admission testing with remediation package. • Increased clerical staff from one to two full-time positions for the Health Sciences Department. • Constructed and furnished an auxiliary Skills Lab with high fidelity mannequins. • Instituted a faculty enrichment program • Hired a nursing student success advisor <p><u>Recommendation:</u></p> <ul style="list-style-type: none"> • Consider a FT Simulation Lab position to coordinate faculty development, and to enhance integration of simulation into the curriculum. • Add a FT clerical position for the AND program.
SECTION 4: PROGRAM ADMINISTRATION AND FACULTY QUALIFICATIONS			

APPROVAL CRITERIA			WORK COPY
	Compliance	Non-Compliance	COMMENTS
SECTION 1425 A program shall report to the board all changes in faculty including changes in teaching areas, prior to employment of or within 30 days after termination of employment of a faculty member. Such changes shall be reported on forms provided by the board.	X		The self –study addresses the faculty responsibility for developing policies & procedures as well as revision of the curriculum, students, and faculty handbook Faculty works through three committees: Curriculum Committee (Monthly); Evaluation and Planning Committee (Semi Annually); and faculty Meeting (Monthly). Nursing Advisory Committee meets annually.
Faculty members shall possess the following qualifications: SECTION 1425(a) A nurse faculty member appointed on or after the effective date of these regulations shall hold a valid, active license issued by the board.	X		
SECTION 1424(g) The faculty shall have the primary responsibility for developing policies and procedures, planning, organizing, implementing and evaluating all aspects of the program.			
SECTION 1424(h) The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas of nursing listed in Section 1426 who shall be responsible for the educational program in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned.	X		There are 15 FT and 16 PT adjunct faculty, which are primarily teaching in the clinical areas Instructor categories are : Instructors-17; Assistant Instructor -7; Clinical Teaching Assistant -7 Content Experts: <u>Medical-Surgical:</u> Elizabeth Sundberg <u>Obstetrics:</u> Sandra Hughes <u>Pediatrics:</u> Debra Dickinson <u>Psychiatric/Mental Health:</u> Susan Atwood <u>Geriatrics:</u> Victoria Beatty
SECTION 1424(j) The assistant director shall function under the supervision of the director. Assistant instructors and clinical teaching assistants shall function under the supervision of an instructor.	X		The assistant director functions under the supervision of the dean/director, assistant instructor functions under supervision of instructor, and Clinical teaching assistants functions under supervision of instructor.
SECTION 1425(d) An instructor shall meet the following requirements: (1) Those set forth in subsections (b)(1) and (b)(4) above; and (2) Completion of at least one year's experience teaching courses related to nursing or a course which includes practice in teaching nursing.	X X		There are 17 Instructors who meet the BRN requirements.
SECTION 1425(e) An assistant instructor shall have:			

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
<p>(1) A baccalaureate degree from an accredited college which shall include courses in nursing, or in natural, behavioral or social sciences relevant to nursing practice;</p> <p>(2) At least one year's continuous, full-time experience in direct patient care practice as a registered nurse.</p>	X		There are seven assistant Instructors and all meet the Board requirements
<p>SECTION 1425(f) A clinical teaching assistant shall have had at least one year's experience, within the previous five years, as a registered nurse providing direct patient care.</p>	X		The program has seven clinical teaching assistants and all meet the Board requirements.
Section 5: CURRICULUM			
<p>SECTION 1424(a) There shall be a written statement of philosophy and objectives which serves as a basis for curriculum structure. Such statement shall take into consideration the individual differences of students, including their cultural and ethnic background, learning styles, goals and support systems. It shall also take into consideration the concepts of nursing and man in terms of nursing activities, the environment, the health-illness continuum, and relevant knowledge from related disciplines.</p>	X-SS P-10		The philosophy is based upon Dorothea Orem's Self-Care. The philosophy and program objectives serve as a basis for the curriculum.

APPROVAL CRITERIA

APPROVAL CRITERIA			WORK COPY
	Compliance	Non-Compliance	COMMENTS
SECTION 1425.1(a) Each faculty member shall assume responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content.	X		AVC utilizes team teaching. Lead faculty orient new faculty to the program, as well as to the individual courses. All faculty on a team meet at the beginning of each semester. Subsequent communication is either by phone or e-mail. Part – time faculty are invited to participate in committee meetings. Team teaching is done; FT faculty orient PT faculty and an orientation meeting is held annually; PT faculty meetings and sent letters to notify any changes in the curriculum. Faculty have responsibility for instruction, student evaluation, planning and implementation of the curriculum.
SECTION 1426(a) The curriculum of a nursing program shall be that set forth in this section. A program's curriculum shall not be implemented or revised until it has been approved by the board.	X		Major Curriculum revision was approved 05/2007. The new curriculum started in Spring 2008. The old curriculum will be phased- out by spring 2010.
SECTION 1426(b) The curriculum shall reflect a unifying theme, which includes the nursing process as defined by the faculty, and shall be designed so that a nurse who completes the program will have the knowledge and skills necessary to function in accordance with the minimum standards for competency set forth in Title 16, California Code of Regulations, section 1443.5.	X		The program unifying theme is based upon Dorothea Orem's Self-Care Theory. The conceptual framework is integrated in all courses. Professional nursing roles are: (Provider of care, communicator, advocate, teacher, manager, professional and researcher) nursing process, health/illness, man and environment. Discussion with students and faculty relevant to implementation of the care plan raised issues of inconsistency in expectation among faculty. <u>Recommendation:</u> Strengthen consistency among faculty regarding the requirements and grading of nursing care plans.
SECTION 1426(c) The curriculum shall consist of not less than fifty-eight (58) semester units, or eighty-seven (87) quarter units, which shall include at least the following number at least the following number of units in the specified course areas:	X		EDP_P-06 form: <ul style="list-style-type: none"> Content required for Licensure has a total of 65.5 units

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
<p>(1) Art and science of nursing, thirty-six (36) semester units or fifty-four (54) quarter units, of which eighteen (18) semester or twenty-seven (27) quarter units will be in theory and eighteen (18) semester or twenty-seven (27) quarter units will be in clinical practice.</p> <p>(2) Communication skills, six (6) semester or nine (9) quarter units. Communication skills shall include principles of verbal, written and group communication.</p> <p>(3) Related natural, behavioral and social sciences, sixteen (16) semester or twenty-four (24) quarter units.</p>	X		<ul style="list-style-type: none"> Nursing units are 40.5 units; Theory =20.5 units and Clinical= 20 units.
	X		<ul style="list-style-type: none"> Communication = 6 units; English 101, 3 units and communication103, 3 units.
	X		<ul style="list-style-type: none"> Required Sciences= 19 units; Anatomy , 4 units ; Physiology , 4 units; Microbiology, 5 units; Sociology 101, 3 units; and Psychology 101, 3 units.
<p>SECTION 1426(d) Theory and clinical practice shall be concurrent in the following nursing areas: medical-surgical, maternal/child, mental health, psychiatric nursing and geriatrics. Instruction will be given in, but not limited to, the following: personal hygiene, human sexuality, client abuse, cultural diversity, nutrition (including therapeutic aspects), pharmacology, legal, social and ethical aspects of nursing, nursing leadership and management.</p>	X		All theory and clinical practices are concurrent.
<p>SECTION 1426(e) The following shall be integrated throughout the entire nursing curriculum.</p> <p>(1) nursing process;</p>	X		All elements were integrated and were reflected in course syllabi.
(2) basic intervention skills in preventive, remedial, supportive and rehabilitative nursing;	X		
(3) physical, behavioral and social aspects of human development from birth through all age levels;	X		
(4) the knowledge and skills required to develop collegial relationships with health care providers from other disciplines;	X		
(5) communication skills including principles of verbal, written and group communications;	X		
(6) natural sciences including human anatomy, physiology and microbiology; and			
(7) related behavioral and social sciences with emphasis on societal and cultural patterns, human development, and behavior relevant to health-illness.	X		
<p>SECTION 1426(f) The course of instruction shall be presented in semester or quarter units under the following formula:</p>	X		E-DP-P_05 form; Class schedule compressed 18 weeks to 16 weeks semester.

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
(1) One (1) hour of instruction in theory each week throughout a semester or quarter equals one (1) unit.	X		1 unit= 1 hour of theory
(2) Three (3) hours of clinical practice each week throughout a semester or quarter equals one (1) unit.	X		1 unit= 3 hours of clinical.
LICENSED VOCATIONAL NURSES AND OTHER HEALTH CARE WORKERS:			
SECTION 1429(a) An applicant who is licensed in California as a vocational nurse is eligible to apply for licensure as a registered nurse if such applicant has successfully completed the courses prescribed below and meets all the other requirements set forth in Section 2736 of the Code. Such applicant shall submit evidence to the board, including a transcript of successful completion of the requirements set forth in subsection (c) and of successful completion or challenge of courses in physiology and microbiology comparable to such courses required for licensure as a registered nurse.	X		Antelope Valley College offers three pathways for the LVNs to become RNs: <ul style="list-style-type: none"> • As a generic student in the AND program • As an Advanced Placement Student (the Transition Course and the last two semester of AND program and • As a 30- unit Option Student.
SECTION 1429(b) The school shall offer objective counseling of this option and evaluate each licensed vocational nurse applicant for admission to its registered nursing program on an individual basis. A school's determination of the prerequisite courses required of a licensed vocational nurse applicant shall be based on an analysis of each applicant's academic deficiencies, irrespective of the time such courses were taken.	X		Extensive counseling is done regarding the restrictions of the thirty unit options.
SECTION 1429(c) The additional education required of licensed vocational nurse applicants shall not exceed a maximum of thirty (30) semester or forty-five (45) quarter units. Courses required for vocational nurse licensure do not count toward fulfillment of the additional education requirement. However, other courses comparable to those required for licensure as a registered nurse, as specified in Section 1426, may be counted toward fulfillment of the additional education requirement.	X		30 unit option has 30 units: Physiology 4 units; Microbiology 5 units; Nursing 21(Advance Medical-Surgical 3.5 units; Leadership 14 units; Psych-MH 3.5 units).

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
<p>Nursing courses shall be taken in an accredited school and shall be beyond courses equivalent to the first year of professional nursing courses. The nursing content shall include nursing intervention in acute, preventive, remedial, supportive, rehabilitative and teaching aspects of nursing. Theory and courses with concurrent clinical practice shall include advanced medical-surgical, mental health, psychiatric nursing and geriatric nursing.</p> <p>The nursing content shall include the basic standards for competent performance prescribed in Section 1443.5 of these regulations.</p>	X		
<p>TRANSFERS AND CHALLENGES:</p> <p>SECTION 2786.6 The board shall deny the application for approval made by, and shall revoke the approval given to, any school of nursing which:</p> <p>SECTION 2786.6(a) Does not give to student applicants credit, in the field of nursing, for previous education and the opportunity to obtain credit for other acquired knowledge by the use of challenge examinations or other methods of evaluation; or</p> <p>SECTION 2786.6(b) Is operated by a community college and discriminates against an applicant for admission to a school solely on the grounds that the applicant is seeking to fulfill the units of nursing required by Section 2736.6.</p>	<p>X</p> <p>X</p> <p>X</p>		<p>Challenge policy is in place for students to challenge courses.</p> <p>The program uses College policy for transfer credits for prior education.</p>
<p>SECTION 6: CLINICAL FACILITIES / CLINICAL EXPERIENCES</p> <p>SECTION 1425.1 (b) The registered nurse faculty members shall be responsible for clinical supervision only of those students enrolled in the registered nursing program.</p> <p>SECTION 1424(I) When non-faculty individuals participate in the instruction and supervision of students obtaining clinical experience, their responsibilities shall be described in writing and kept on file by the nursing program.</p>	<p>X</p> <p>X</p>		<p>No preceptors are needed</p>

APPROVAL CRITERIA

WORK COPY

APPROVAL CRITERIA			COMMENTS
	Compliance	Non-Compliance	
SECTION 1427(a) A nursing program shall not utilize agencies and/or community facilities for clinical experience without prior approval by the board. Each program must submit evidence that it has complied with the requirements of subdivisions (b) and (c) of this section and the policies outlined by the board.	X		All agencies meet Board of Registered Nursing requirements.
SECTION 1427(b) A program which utilizes agencies and/or community facilities for clinical experience shall maintain written objectives for student learning in such facilities, stated in measurable performance terms, and shall assign students only to facilities which can provide the experience necessary to meet those objectives.	X		Assistant Director is responsible for communication with facilities, including placement of student rotations.
SECTION 1427(c) Each such program shall maintain written agreements with such facilities and such agreements shall include the following:	X		Contracts are current.
(1) Assurance of the availability and appropriateness of the learning environment in relation to the program's written objectives;	X		
(2) Provision for orientation of faculty and students;	X		
(3) A specification of the responsibilities and authority of the facility's staff as related to the program and to the educational experience of the students;	X		
(4) Assurance that staff is adequate in number and quality to insure safe and continuous health care services to the patients;	X		
(5) Provisions for continuing communication between the facility and the program; and	X		
(6) A description of the responsibilities of faculty assigned to the facility utilized by the program.	X		
(6) A description of the responsibilities of faculty assigned to the facility utilized by the program.	X		

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1424(k) The student/teacher ratio in the clinical setting shall be based on the following criteria: 1) acuity of patient needs; 2) objectives of the learning experience; 3) class level of the students; 4) geographic placement of students; 5) teaching methods; and 6) Requirements established by the clinical agency.	X		Ratio of 1 faculty: 10 students (1:10) is used in the first three semesters and 1:12 in the fourth semester.
SECTION 1428(c) Tools used to evaluate students' progress and performance and clinical learning experiences shall be stated in measurable terms directly related to course objectives.	X		Weekly formative evaluation and Summative evaluations are given at the end of the rotation. For students with difficulties, Notification of Unsatisfactory Clinical Performance is used to notify and provide structured assistance.
SECTION 7: STUDENT PARTICIPATION SECTION 1428(a) Students shall be provided the opportunity to participate with the faculty in the identification of policies and procedures related to students including but not limited to: (1) Philosophy and objectives; (2) Clinical facilities; (3) Learning experience; and (4) Curriculum, instruction and evaluation of the various aspects of the program.	X		Student representatives are elected and encouraged to attend program committee meetings. Students participate in the curriculum process by providing course, faculty, and clinical facilities evaluations of each course.

Sections and Related BRN Approval Rules and Regulations

Section	Rules and Regulations
Section 1: Program Director and Assistant Director	Section 1424 (e); 1424(f); 1425(b) 1 – 5; 1425(c);
Section 2: Total Program Evaluation	Section 1424(b); 1424(b)(1); 1428(b)
Section 3: Sufficiency of Resources	1424(d)
Section 4: Program Administration and Faculty Qualifications	Section 1424(g); 1424(h); 1424(j); 1425; 1425(a); 1425(d); 1425(e); 1425(f);
Section 5: Curriculum	Section 1424(a); 1425; 1425.1(a); 1426(a); 1426(b); 1426(c); 1426(d); 1426(e); 1426(f); 1429(a); 1429(b); 1429(c); 2786.6; 2786.6(a); 2786.6(b)
Section 6: Clinical Facilities and Clinical Experiences	Section 1424(I); 1424(k); 1425.1 (b); 1427(a); 1427(b); 1427(c); 1428(c);
Section 7: Student Participation	Section 1428(a)



ANTELOPE VALLEY COLLEGE

DATE: January 13, 2009

TO: Maria Bedroni, Senior Nursing Education Consultant
Badrieh Caraway, Nursing Education Consultant

FROM: Dr. Karen Cowell, Dean, Health Sciences and Program Director

SUBJECT: Response to recommendations arising from December 2008 continuing approval visit

The faculty, administration and I are grateful for the thorough review of our associate degree nursing curriculum completed by Badrieh Caraway. The visit was cordial and enlightening for all. After careful consideration of the recommendations and the college's present budget situation, the college will implement the following measures:

1. Section 1424(e) Administration and Organization of the Nursing Program

Increase the amount of administrative release time for the Assistant Directors and the Assistant Director/Department Chair to meet the program's needs

On January 12, 2009, the Antelope Valley College Federation of Teachers and the Antelope Valley Community College District signed a memorandum of understanding that grants 60% reassigned time to the Assistant Director/Department Chair and 20% reassigned time to each of the two other Assistant Directors (AD). The administration of the program has been divided so that the AD/Department Chair has primary responsibility for the scheduling and curriculum, the second AD has responsibility for implementing the program evaluation and planning functions, and the third AD has responsibility for monitoring contracts and student enrollments.

2. Section 1424(d) Resources

Consider a FT Simulation Lab position to coordinate faculty development, and to enhance integration of simulation into the curriculum

At this time, simulation is in its infancy in the curriculum at Antelope Valley College. In addition, the present fiscal affairs of the state and the college are such that we cannot consider adding a faculty position in any discipline. In fact, faculty positions are not being filled for the 2009-10 academic year.

The Assistant Director/Department Chair will be assuming the coordination of training and will take the role of co-chair of the existing Simulation Committee along with another faculty member. Training for the simulators that are owned by the college was conducted on January 22 and 23, 2009. The faculty that attended the training plan to take an online course through the NLN-SIRC on debriefing. Some faculty attended a session on teaching with simulation at the Mosby Nurse Educator Conference in Orlando, FL, on January 4. Faculty intends to attend the "Magic in Teaching" conference in March.



ANTELOPE VALLEY COLLEGE

Add a FT clerical position for the ADN program

In response to budget reductions, Antelope Valley College is not filling any classified/clerical positions for 2009-10. For March 2009 through December 2009, the college will be hiring a full time, grant-funded clerical position to support the program. It is hoped that college funding will be available beginning in January 2010 so that the program can add a permanent position.

3. Section 1426(b) Curriculum

Strengthen nursing care plan and clinical evaluation tools to provide clear expectations and to ensure consistency among all faculty in student evaluation.

After the continuing approval visit, the Curriculum Committee discussed inconsistencies in care plan expectations. The committee developed a standard format that will be used in all courses. This care plan format is in the mandatory student resource manual. In addition a rubric for grading nursing care plans was developed and will be instituted in all semesters. The full time faculty will be re-orienting adjunct faculty to the use of the rubric and will monitor its effectiveness.

Formative and summative evaluations were developed for the curriculum which was implemented in spring 2008. The weekly formative evaluations and the summative evaluation address the student's role as provider and manager of care, communicator and collaborator, patient advocate, teacher, and member of the profession. A rubric delineates satisfactory/unsatisfactory behaviors in clinical. The full time faculty will be re-orienting adjunct faculty to the use of the evaluation tools.

NCLEX PASS RATES FIRST TIME CANDIDATES

2004-2009

Antelope Valley College

	JUL-SEP			OCT-DEC			JAN-MAR			APR-JUN			ANNUAL RATE		
	Taken	Passed	Percent	Taken	Passed	Percent	Taken	Passed	Percent	Taken	Passed	Percent	Taken	Passed	Percent
2004 - 2005	43	42	97.67%	8	7	87.50%	39	36	92.31%	5	3	60.00%	95	88	92.63%
2005 - 2006	45	40	88.89%	6	4	66.67%	37	32	86.49%	16	15	93.75%	104	91	87.50%
2006 - 2007	32	31	96.88%	2	2	100.00%	35	33	94.29%	9	8	88.89%	78	74	94.87%
2007 - 2008	63	49	77.78%	10	7	70.00%	69	61	88.41%	14	12	85.71%	156	129	82.69%
2008 - 2009	66	58	87.88%	2	2	100.00%	0	0		0	0		68	60	88.24%

Monday, February 23, 2009

Source: NCSBN G1-G6 Reports

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BOARD OF REGISTERED NURSING
Education/Licensing Committee
Agenda Item Summary

AGENDA ITEM: 10.2.4

DATE: March 19, 2009

ACTION REQUESTED: Continue/Not Continue Approval of Los Angeles City College Associate Degree Nursing Program.

REQUESTED BY: Badrieh Caraway, NEC

BACKGROUND: Betsy Manchester, RN, MSN, NP, is the Director of Nursing Program since August 2007.

A continuing approval visit was done at Los Angeles City College (LACC) Associate Degree Nursing Program on December 9- 10, 2008 by Maria Bedroni, SNEC, and Badrieh Caraway, NEC. The program was found to be in non-compliance in two areas Section 1424 (b) - Program Evaluation and Section 1424(d) Resources. One recommendation was given related to CCR Section 1425 (a) – Program administration faculty qualifications

The college is currently undergoing major construction with anticipation that the nursing program will be moving to the new Science and Technology Building sometime in 2009. Closure of one of the main campus classroom building had significant impact on the nursing program.

During the last four years the program has experienced a number of administrative changes as well as changes in faculty and student needs. At the present time there are insufficient resources to sustain the program. There is a lack of faculty to initiate the next semester, lack of classrooms, physical space, equipment, new technology, and linen services for the skill lab.

Several students expressed a concern about the current program status and the numerous changes in classroom spaces and instability. The nursing program has minimum funds and is sustained mainly by the current grants. Current faculty are also under stress because of the lack of resources and space to deliver instruction.

The program's NCLEX pass rate has been variable ranging from 66.67% in 2004-05 to the current of 94.99% in 2008-2009.

The Los Angeles City College Associate Degree Nursing program has strong community support.

NEXT STEP:

Place on Board agenda

**FISCAL
IMPLICATION(S), IF ANY:**

None

PERSON(S) TO CONTACT:

Badrieh Caraway, MS, MEd, RN
Nursing Education Consultant

Report of Findings

Los Angeles City College Associate Degree Nursing Program

Continuing Approval Visit: December 9-10, 2008

NON-COMPLIANCE:

1. SECTION 1424(b) There is no written plan for evaluation of the total program.
2. SECTION 1424(d) There are insufficient resources to sustain the program. There are several limitations such as the lack of classrooms, limited physical space, no linen services for skill lab, old beds, old equipment, and minimal technology. Faculty is also needed to initiate next semester. Budget also needs immediate attention. Program is supported by grants obtained by faculty.

RECOMMENDATION:

SECTION 1424(h) All faculty teaching Geriatrics (since geriatrics is integrated) must have a BRN approved form.

**CONSULTANT APPROVAL REPORT FOR
CONTINUING APPROVAL REVIEW**

EDP-S-08 (Rev..6/04)

WORK COPYRuth Ann Terry, MPH, RN
Executive Officer
(916) 322-3350
(626) 575-7080

PROGRAM NAME: Los Angeles City College AND Program

DATES OF VISIT: December 9-10 2008

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1: PROGRAM DIRECTOR / ASSISTANT DIRECTOR			
SECTION 1425(b) The registered nurse director of the program shall have:			Betsy Manchester, RN, MSN,NP appointed 08/2007
(1) A Master's or higher degree from an accredited college or university which includes course work in nursing, education or administration;	x		MSN University of Phoenix
(2) A minimum of one year's experience in an administrative position;	x		Assistant Director 2002-2007
(3) A minimum of two year's experience teaching in pre- or post-licensure nursing programs;	x		
(4) At least one year's experience as a registered nurse providing direct patient care; or	x		Antelope Valley Medical Center 1986
(5) Equivalent experience and/or education as determined by the board.	x		
SECTION 1425(c) The registered nurse assistant director shall meet the education requirements set forth in subsections (b)(1) above and the experience requirements set forth in subsections (b)(3) and (b)(4) above or such experience as the board determines to be equivalent.	x		Darlene Upshaw, Rn , MSN, NP appointed 1/07 University of Phoenix 2003.
SECTION 1424(e) A sufficient period of time shall be set aside, by the institution, exclusively for the use of the director or his or her designee in the administration of the program.			Currently the Director has 100% release time And the Ass. Director 20% release time
SECTION 1424(f) The program shall have a registered nurse faculty member who is knowledgeable and current regarding the program and the policies and procedures by which it is administered and who can perform the director's duties in the person's absence.			The Ass. Director will assume the role in the absence of the Director

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 2: TOTAL PROGRAM EVALUATION			
SECTION 1424(b) The policies and procedures by which the program is administered shall be in writing, shall reflect the philosophy and objectives of the program, and shall be available to all students.	X		
(1) The nursing program shall have a written plan for evaluation of the total program, including admission and selection procedures, attrition and retention of students, and performance of graduates in meeting community needs.		X	NON COMPLIANCE: There is no written plan for evaluation of the total program
SECTION 1428(b) The program shall have a procedure for resolving student grievances.	X		There is policy stated in the catalog
SECTION 3: SUFFICIENCY OF RESOURCES			
SECTION 1424(d) The program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment to achieve the program's objectives.		X	NON-COMPLIANCE There are insufficient resources to sustain the program. There is a lack of classrooms, physical space, linen services for skill lab, physical space, current equipment, and technology. Faculty is also needed to initiate next semester
SECTION 4: PROGRAM ADMINISTRATION AND FACULTY QUALIFICATIONS			
SECTION 1425 A program shall report to the board all changes in faculty including changes in teaching areas, prior to employment of or within 30 days after termination of employment of a faculty member. Such changes shall be reported on forms provided by the board.	X		All faculty forms were updated
Faculty members shall possess the following qualifications: SECTION 1425(a) A nurse faculty member appointed on or after the effective date of these regulations shall hold a valid, active license issued by the board.	X		
SECTION 1424(g) The faculty shall have the primary responsibility for developing policies and procedures, planning, organizing, implementing and evaluating all aspects of the program.			

APPROVAL CRITERIA

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1424(h) The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas of nursing listed in Section 1426 who shall be responsible for the educational program in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned.			<p>There are six instructors and nine assistant instructor</p> <p>Content experts are:</p> <p>M/S and Geriatrics:F. Ferand</p> <p>OB: , M Marcklinger</p> <p>Peds: Simpson-Turk,</p> <p>Psy-Mental Health: D.Levy, and M.Marcklinger,</p> <p>RECOMMENDATION</p> <p>All faculty teaching Geriatrics (since geriatrics is integrated) must have a BRN approved form.</p>
SECTION 1424(j) The assistant director shall function under the supervision of the director. Assistant instructors and clinical teaching assistants shall function under the supervision of an instructor.			
<p>SECTION 1425(d) An instructor shall meet the following requirements:</p> <p>(1) Those set forth in subsections (b)(1) and (b)(4) above; and</p> <p>(2) Completion of at least one year's experience teaching courses related to nursing or a course which includes practice in teaching nursing.</p>	X		
<p>SECTION 1425(e) An assistant instructor shall have:</p> <p>(1) A baccalaureate degree from an accredited college which shall include courses in nursing, or in natural, behavioral or social sciences relevant to nursing practice;</p> <p>(2) At least one year's continuous, full-time experience in direct patient care practice as a registered nurse.</p>	X		

APPROVAL CRITERIA

	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1425(f) A clinical teaching assistant shall have had at least one year's experience, within the previous five years, as a registered nurse providing direct patient care.	X		No CTAs
Section 5: CURRICULUM			
SECTION 1424(a) There shall be a written statement of philosophy and objectives which serves as a basis for curriculum structure. Such statement shall take into consideration the individual differences of students, including their cultural and ethnic background, learning styles, goals and support systems. It shall also take into consideration the concepts of nursing and man in terms of nursing activities, the environment, the health-illness continuum, and relevant knowledge from related disciplines.	x		
SECTION 1425.1(a) Each faculty member shall assume responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content.	X		Full time faculty works in collaboration with part-time faculty
SECTION 1426(a) The curriculum of a nursing program shall be that set forth in this section. A program's curriculum shall not be implemented or revised until it has been approved by the board.	X		The curriculum will change Fall 2009 as all the LACC systems schools will have the same curriculum
SECTION 1426(b) The curriculum shall reflect a unifying theme, which includes the nursing process as defined by the faculty, and shall be designed so that a nurse who completes the program will have the knowledge and skills necessary to function in accordance with the minimum standards for competency set forth in Title 16, California Code of Regulations, section 1443.5.			Currently the nursing curriculum is based upon the Roy Adaptation Model. The major concepts are person, environment, health and nursing. Not all the syllabus reflect the model however the program is in the process of changing curriculum

APPROVAL CRITERIA

WORK COPY

APPROVAL CRITERIA			COMMENTS
	Compliance	Non-Compliance	
<p>SECTION 1426(c) The curriculum shall consist of not less than fifty-eight (58) semester units, or eighty-seven (87) quarter units, which shall include at least the following number at least the following number of units in the specified course areas:</p> <p>(1) Art and science of nursing, thirty-six (36) semester units or fifty-four (54) quarter units, of which eighteen (18) semester or twenty-seven (27) quarter units will be in theory and eighteen (18) semester or twenty-seven (27) quarter units will be in clinical practice.</p> <p>(2) Communication skills, six (6) semester or nine (9) quarter units. Communication skills shall include principles of verbal, written and group communication.</p> <p>(3) Related natural, behavioral and social sciences, sixteen (16) semester or twenty-four (24) quarter units.</p>			<p>There is a total of 72 units</p> <p>There are 38 units for nursing (18.5 for theory and 19.5 for clinical)</p> <p>Six units</p> <p>21 Units</p>
<p>SECTION 1426(d) Theory and clinical practice shall be concurrent in the following nursing areas: medical-surgical, maternal/child, mental health, psychiatric nursing and geriatrics. Instruction will be given in, but not limited to, the following: personal hygiene, human sexuality, client abuse, cultural diversity, nutrition (including therapeutic aspects), pharmacology, legal, social and ethical aspects of nursing, nursing leadership and management.</p>	x		
<p>SECTION 1426(e) The following shall be integrated throughout the entire nursing curriculum.</p> <p>(1) nursing process;</p> <p>(2) basic intervention skills in preventive, remedial, supportive and rehabilitative nursing;</p> <p>(3) physical, behavioral and social aspects of human development from birth through all age levels;</p> <p>(4) the knowledge and skills required to develop collegial relationships with health care providers from other disciplines;</p> <p>(5) communication skills including principles of verbal, written and group communications;</p> <p>(6) natural sciences including human anatomy, physiology and microbiology; and</p> <p>(7) related behavioral and social sciences with emphasis on societal and cultural patterns, human development, and behavior relevant to health-illness.</p>	X		All areas are included. Program will change curriculum Fall 2009

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1426(f) The course of instruction shall be presented in semester or quarter units under the following formula: (1) One (1) hour of instruction in theory each week throughout a semester or quarter equals one (1) unit. (2) Three (3) hours of clinical practice each week throughout a semester or quarter equals one (1) unit.	X		Forms need to be updated to reflect minor unit changes
LICENSED VOCATIONAL NURSES AND OTHER HEALTH CARE WORKERS:	X		Units are in compliance with BRN formula Currently there are no 30 Unit option students
SECTION 1429(a) An applicant who is licensed in California as a vocational nurse is eligible to apply for licensure as a registered nurse if such applicant has successfully completed the courses prescribed below and meets all the other requirements set forth in Section 2736 of the Code. Such applicant shall submit evidence to the board, including a transcript of successful completion of the requirements set forth in subsection (c) and of successful completion or challenge of courses in physiology and microbiology comparable to such courses required for licensure as a registered nurse.			
SECTION 1429(b) The school shall offer objective counseling of this option and evaluate each licensed vocational nurse applicant for admission to its registered nursing program on an individual basis. A school's determination of the prerequisite courses required of a licensed vocational nurse applicant shall be based on an analysis of each applicants academic deficiencies, irrespective of the time such courses were taken.	X		
SECTION 1429(c) The additional education required of licensed vocational nurse applicants shall not exceed a maximum of thirty (30) semester or forty-five (45) quarter units. Courses required for vocational nurse licensure do not count toward fulfillment of the additional education requirement. However, other courses comparable to those required for licensure as a registered nurse, as specified in Section 1426, may be counted toward fulfillment of the additional education requirement.	X		

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
<p>Nursing courses shall be taken in an accredited school and shall be beyond courses equivalent to the first year of professional nursing courses. The nursing content shall include nursing intervention in acute, preventive, remedial, supportive, rehabilitative and teaching aspects of nursing. Theory and courses with concurrent clinical practice shall include advanced medical-surgical, mental health, psychiatric nursing and geriatric nursing.</p> <p>The nursing content shall include the basic standards for competent performance prescribed in Section 1443.5 of these regulations.</p>	X		
<p>TRANSFERS AND CHALLENGES:</p> <p>SECTION 2786.6 The board shall deny the application for approval made by, and shall revoke the approval given to, any school of nursing which:</p> <p>SECTION 2786.6(a) Does not give to student applicants credit, in the field of nursing, for previous education and the opportunity to obtain credit for other acquired knowledge by the use of challenge examinations or other methods of evaluation; or</p> <p>SECTION 2786.6(b) Is operated by a community college and discriminates against an applicant for admission to a school solely on the grounds that the applicant is seeking to fulfill the units of nursing required by Section 2736.6.</p>	<p>X</p> <p>X</p> <p>X</p>		<p>Credit for previous education is given</p>
<p>SECTION 6: CLINICAL FACILITIES / CLINICAL EXPERIENCES</p> <p>SECTION 1425.1(b) The registered nurse faculty member shall be responsible for clinical supervision only of those students enrolled in the registered nursing program.</p> <p>SECTION 1424(i) When non-faculty individuals participate in the instruction and supervision of students obtaining clinical experience, their responsibilities shall be described in writing and kept on file by the nursing program.</p>	<p>X</p> <p>X</p>		<p>Faculty only supervise ADN students</p> <p>None utilized</p>

APPROVAL CRITERIA

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1427(a) A nursing program shall not utilize agencies and/or community facilities for clinical experience without prior approval by the board. Each program must submit evidence that it has complied with the requirements of subdivisions (b) and (c) of this section and the policies outlined by the board.	X		
SECTION 1427(b) A program which utilizes agencies and/or community facilities for clinical experience shall maintain written objectives for student learning in such facilities, stated in measurable performance terms, and shall assign students only to facilities which can provide the experience necessary to meet those objectives.			All contract were reviewed
SECTION 1427(c) Each such program shall maintain written agreements with such facilities and such agreements shall include the following: (1) Assurance of the availability and appropriateness of the learning environment in relation to the program's written objectives; (2) Provision for orientation of faculty and students; (3) A specification of the responsibilities and authority of the facility's staff as related to the program and to the educational experience of the students; (4) Assurance that staff is adequate in number and quality to insure safe and continuous health care services to the patients; (5) Provisions for continuing communication between the facility and the program; and (6) A description of the responsibilities of faculty assigned to the facility utilized by the program.			All contracts include the required elements
(6) A description of the responsibilities of faculty assigned to the facility utilized by the program.			

APPROVAL CRITERIA

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1424(k) The student/teacher ratio in the clinical setting shall be based on the following criteria: 1) acuity of patient needs; 2) objectives of the learning experience; 3) class level of the students; 4) geographic placement of students; 5) teaching methods; and 6) requirements established by the clinical agency.	X		Faculty ratio is usually 10:1
SECTION 1428(c) Tools used to evaluate students' progress and performance and clinical learning experiences shall be stated in measurable terms directly related to course objectives.	X		Forms are in accordance to the objectives
SECTION 7: STUDENT PARTICIPATION SECTION 1428(a) Students shall be provided the opportunity to participate with the faculty in the identification of policies and procedures related to students including but not limited to: (1) Philosophy and objectives; (2) Clinical facilities; (3) Learning experience; and (4) Curriculum, instruction and evaluation of the various aspects of the program.	X		There is evidence that students do participate

NCLEX PASS RATES FIRST TIME CANDIDATES

2004-2009

Los Angeles City College

	JUL-SEP			OCT-DEC			JAN-MAR			APR-JUN			ANNUAL RATE		
	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>
2004 - 2005	19	14	73.68%	5	2	40.00%	0	0		0	0		24	16	66.67%
2005 - 2006	26	23	88.46%	5	5	100.00%	5	3	60.00%	2	2	100.00%	38	33	86.84%
2006 - 2007	41	40	97.56%	10	7	70.00%	4	3	75.00%	2	2	100.00%	57	52	91.23%
2007 - 2008	26	18	69.23%	1	0	0.00%	4	2	50.00%	2	2	100.00%	33	22	66.67%
2008 - 2009	37	35	94.59%	2	1	50.00%	0	0		0	0		39	36	92.31%

Monday, February 23, 2009

Source: NCSBN G1-G6 Reports

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BOARD OF REGISTERED NURSING
Education/Licensing Committee
Agenda Item Summary

AGENDA ITEM: 10.2.5

DATE: March 19, 2009

ACTION REQUESTED: Continue/Not continue approval of the Modesto Junior College Associate Degree Nursing Program

REQUESTED BY: Kay Weinkam, M.S., RN, CNS
Nursing Education Consultant

BACKGROUND: Bonnie Costello, M.S.N., is the Director of the Nursing Program. Teryl Ward, M.S.N. and Lisa Riggs, M.S.N., are the Assistant Directors.

Modesto Junior College is located in the upper portion of the San Joaquin Valley. Modesto Junior College and Columbia College in Columbia are part of the Yosemite Community College District. Modesto Junior College enrolls over 18,000 students, and offers over 180 degree and certificate programs, among them the Associate of Science degree in Nursing. A change since the last approval visit in February 2004 is that the College now offers an LVN program.

The College is divided into two campuses: prerequisite courses and general education courses are taken on the East Campus. The nursing program is offered on the West Campus, about two miles away from the East Campus. Faculty offices, administrative offices, classrooms, the skills lab, simulation lab, and the computer lab are housed in John Muir Hall.

The program admits students twice a year. In 2002-2003, the program admitted 60 students. With its expansion, and the availability of the Columbia College satellite site approved in 2001, the program accepted 176 students during the 2006-2007 school year. There are now over 3,000 ADN graduates, including sixty-nine students from Columbia.

The program's NCLEX pass rate for first-time test takers ranges from 93% to 96%, averaging 94%, for the previous four full academic years since the last approval visit in 2004. The rate for the 144 students of the 2007-2008 academic year is 93%.

To deal with the program's expansion, there are now 17 full-time and 25 part-time faculty. There are currently no faculty vacancies.

A regularly scheduled continuing approval visit was conducted November 21 to 23, 2008, by this consultant. Visits to the classroom/lab site and the affiliated hospital in Sonora used by the satellite program at Columbia College were included.

The program is in compliance with the Board's rules, laws, and regulations. Three recommendations were given. Please refer to the attached Report of Findings. The program submitted responses that addressed the Findings in January and February.

Although a new Allied Health Sciences building is planned for the West campus, some changes have already been made to reduce the square footage due to funding changes. The program continues to advocate for appropriate facilities that will ensure it meets its educational objectives.

The program receives strong community and administrative support, and benefits from a committed faculty and program support staff.

NEXT STEPS: Place on Board Agenda.

**FISCAL IMPLICATIONS,
IF ANY:** None

PERSON TO CONTACT: Kay Weinkam
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e-mail: Kay_Weinkam@dca.ca.gov

Report of Findings

Modesto Junior College
Associate Degree Nursing Program
Continuing Approval Visit
November 17-20, 2008

Recommendations:

1424(b)(1) Total Program Evaluation

Include a starting year for those components evaluated on other than an annual or semester basis.

1424(d) Resources

Evaluate the adequacy of supplies available to the students in the skills lab for their practice and skills demonstration. Review all media holdings for recency.

1427(c) Clinical Facilities

Ensure that the addendum that addresses this regulations's components is part of the agreements that are renewed in 2009 and 2010.

**CONSULTANT APPROVAL REPORT FOR
CONTINUING APPROVAL REVIEW**

EDP-S-08 (Rev. 06/04)

Ruth Ann Terry, MPH, RN
Executive Officer
(916) 322-3350

PROGRAM NAME: Modesto Junior College Associate Degree Nursing Program

DATES OF VISIT: November 17-20, 2008

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1: PROGRAM DIRECTOR / ASSISTANT			
DIRECTOR			
SECTION 1425(b) The registered nurse director of the program shall have:			Bonnie Costello was appointed Director in 1992.
(1) A Master's or higher degree from an accredited college or university which includes course work in nursing, education or administration;	X		M.S.N. California State University, Fresno
(2) A minimum of one year's experience in an administrative position;	X		
(3) A minimum of two year's experience teaching in pre- or post-licensure nursing programs;	X		
(4) At least one year's experience as a registered nurse providing direct patient care; or	X		
(5) Equivalent experience and/or education as determined by the board.			n/a
SECTION 1425(c) The registered nurse assistant director shall meet the education requirements set forth in subsections (b)(1) above and the experience requirements set forth in subsections (b)(3) and (b)(4) above or such experience as the board determines to be equivalent.	X		There are two Assistant Directors. Teryl Ward, M.S.N. appointed September 2002 Lisa Riggs, M.S.N. appointed April 2000
SECTION 1424(e) A sufficient period of time shall be set aside, by the institution, exclusively for the use of the director or his or her designee in the administration of the program.	X		The Director has 100% release time to administer the Program. The Program Director is not on salary during the summer, but must be available to recruit and orient faculty for the fall semester when there are usually vacancies. MJC recently started an LVN program, which has its own director.

Consultant Approval Report for: Modesto Junior College. Entries are made based on a review of the self-study; nursing student, student, and faculty handbooks; catalog; course syllabi; and various other materials, as well as visits to the campus and selected clinical facilities, discussions with various college community members, and examination of the contents of BRN files.

Dates of visit: November 17-20, 2008

APPROVAL CRITERIA	WORK COPY		
	Compliance	Non-Compliance	COMMENTS
SECTION 1424(f) The program shall have a registered nurse faculty member who is knowledgeable and current regarding the program and the policies and procedures by which it is administered and who can perform the director's duties in the person's absence.	X		Release time of 65% is provided Ms. Riggs and 5% to Ms. Ward (grant writing and technology development). There is a coordinator for the Columbia College satellite site.
SECTION 2: TOTAL PROGRAM EVALUATION			
SECTION 1424(b) The policies and procedures by which the program is administered shall be in writing, shall reflect the philosophy and objectives of the program, and shall be available to all students.	X		The College has policies related to special accommodations, standards of conduct/student complaint procedures. The College has identified and uses the ability to read as one criteria of success for program admission.
(1) The nursing program shall have a written plan for evaluation of the total program, including admission and selection procedures, attrition and retention of students, and performance of graduates in meeting community needs.	X		The program uses a format called "Care Plans." Various components of the evaluation plan are the responsibility of specific committees, and each uses the care plan format. There is an overall Program Committee (all faculty); committees such as the Curriculum Committee, Advising Committee, Policies and Procedures Committee, Student Participation Committee, Evaluation Committee, and Resources subcommittee. Care plans are also developed for Test Analysis, Courses (theory and clinical), Columbia Satellite, IP-VCR technology, and Tutoring.
SECTION 1428(b) The program shall have a procedure for resolving student grievances.	X		Recommendation: Include a starting year for those components evaluated on other than an annual or semester basis. No formal grievances have been filed since the last approval visit.

SECTION 3: SUFFICIENCY OF RESOURCES

SECTION 1424(d) The program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment to achieve the program's objectives.

X

The Program increased enrollment from 60 to 80 first semester students in January 2005. Admissions since then have stayed at 75. There are currently no faculty vacancies. Half of the part-time faculty have completed seven modules and received certificates from the online clinical faculty development course on www.4faculty.org. A part-time tutor has been hired to work with students in both theory and clinical. Grants have funded a part-time position to assist the Columbia College coordinator and provide support services for those faculty and students.

The Hospital Consortium (7 local hospitals, a rehabilitation hospital, and a psychiatric facility) will contribute over \$882,000 for 2008-2010, and the MJC Foundation also provides support for these positions.

There are Human Patient Simulation labs at both MJC and Columbia College (opened 11/14/07). Three semesters of the program now have simulation scenarios integrated into the courses; the fourth semester will achieve this in spring 2009.

Internet Protocol/Video Capture and Recording (IP-VCR) is technology that allows visual and audio recording of a class session to then later be available to students through Web access. This allows students to review material that may have been unclear during the class session, review for exams, and "attend" a class that they had to miss due to illness or emergency.

A new Allied Health building is scheduled for completion in 2011 on the west campus. The building will provide three times as much square footage as now exists.

Recommendation: Evaluate the adequacy of supplies available to the students in the skills lab for their practice and skills demonstration. Review all media holdings for recency.

SECTION 4: PROGRAM ADMINISTRATION AND FACULTY QUALIFICATIONS

SECTION 1424(g) The faculty shall have the primary responsibility for developing policies and procedures, planning, organizing, implementing and evaluating all aspects of the program.

SECTION 1425.1(a) Each faculty member shall assume responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content.

SECTION 1424(h) The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas listed in Section 1426 who shall be responsible for the educational program in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned.

SECTION 1425 A program shall report to the board all changes in faculty including changes in teaching areas, prior to employment of or within 30 days after termination of employment of a faculty member. Such changes shall be reported on forms provided by the board. Faculty members shall possess the following qualifications:

(a) A nurse faculty member appointed on or after the effective date of these regulations shall hold a valid, active license issued by the board.

(d) An instructor shall meet the following requirements:

X		Program uses the "care plan" format as part of its Total Program Evaluation Plan. The care plans for skills lab and courses are presented at the faculty's biannual meeting held February of even-numbered years. The programs's care plan and other program-related care plans are presented at a meeting in April of even-numbered years.
X		The work of the Program is carried out by the full faculty at its meeting and by committees such as Advising, Curriculum, Evaluation, Policies and Procedures, Resources, and Student Participation. All faculty are encouraged to participate in team meetings that are held weekly.
X		Full-time: 17 Part-time 25 Total: 42 Instructors: 14 Assistant Instructors 20 Clinical Teaching Assistants: 8 Content experts: Med/Surg: Leanne Bartels, Jill Ramsey, Glad Schmitt OB: Gloria Coats Peds: Eileen Hale Psych/Mental Health: Libbie Lanigan Geriatrics: Bonnie Costello
X		
X		

(1) Those set forth in subsections (b)(1) and (b)(4) above; and	X		
(2) Completion of at least one year's experience teaching courses related to nursing or a course which includes practice in teaching nursing.	X		
(e) An assistant instructor shall have: (1) A baccalaureate degree from an accredited college which shall include courses in nursing, or in natural, behavioral or social sciences relevant to nursing practice; (2) At least one year's continuous, full-time experience in direct patient care practice as a registered nurse.	X		
(f) A clinical teaching assistant shall have had at least one year's experience, within the previous five years, as a registered nurse providing direct patient care.	X		
Section 1424(c) There shall be an organizational chart which identifies the relationships, lines of authority and channels of communication within the program, between the program and other administrative segments of the institution with which it is affiliated, and between the program, the institution and clinical agencies.	X		
SECTION 1424(j) The assistant director shall function under the supervision of the director. Assistant instructors and clinical teaching assistants shall function under the supervision of an instructor.	X		

<p>Section 5: CURRICULUM</p> <p>SECTION 1424(a) There shall be a written statement of philosophy and objectives which serves as a basis for curriculum structure. Such statement shall take into consideration the individual differences of students, including their cultural and ethnic background, learning styles, goals and support systems. It shall also take into consideration the concepts of nursing and man in terms of nursing activities, the environment, the health-illness continuum, and relevant knowledge from related disciplines.</p> <p>SECTION 1426(a) The curriculum of a nursing program shall be that set forth in this section. A program's curriculum shall not be implemented or revised until it has been approved by the board.</p> <p>SECTION 1426(b) The curriculum shall reflect a unifying theme, which includes the nursing process as defined by the faculty, and shall be designed so that a nurse who completes the program will have the knowledge and skills necessary to function in accordance with the minimum standards for competency set forth in Title 16, California Code of Regulations, section 1443.5.</p> <p>SECTION 1426(c) The curriculum shall consist of not less than fifty-eight (58) semester units, or eighty-seven (87) quarter units, which shall include at least the following number at least the following number of units in the specified course areas:</p> <p>(1) Art and science of nursing, thirty-six (36) semester units or fifty-four (54) quarter units, of which eighteen (18) semester or twenty-seven (27) quarter units will be in theory and eighteen (18) semester or twenty-seven (27) quarter units will be in clinical practice.</p> <p>(2) Communication skills, six (6) semester or nine (9) quarter units. Communication skills shall include principles of verbal, written and group communication.</p>			
	X		<p>The MJC mission statement addresses student-centered learning and success.</p> <p>The faculty re-evaluate the philosophy, objectives, and conceptual framework every four years during the faculty analysis of the Total Program Evaluation Plan.</p> <p>The terminal objectives are based on the Roy Adaptation Model, professional behavior, and the Standards of Competent Performance.</p>
	X		<p>Last approved curriculum change was approved September 4, 2008.</p>
	X		<p>The Roy Adaptation Model is used (Concepts of human adaptations to alterations in health status and the nurse's role in promoting that process).</p> <p>The NCLEX pass rates for the academic years ending 2005-2008 range from 93-96%. The average pass rate for these four years is 94% and the average number of test takers per year is 129 students.</p>
	X		<p>The program grants the Associate in Science degree in Nursing. 71.5 units are required for the degree. The Nursing Program consists of 66 semester units.</p>
	X		<p>Content Required for Licensure: Nursing 40 semester units (21.5 theory, 18.5 clinical)</p>
	X		<p>Communication: 6 units</p>

Consultant Approval Report for: Modesto Junior College. Entries are made based on a review of the self-study; nursing student, student, and faculty handbooks; catalog; course syllabi; and various other materials, as well as visits to the campus and selected clinical facilities, discussions with various college community members, and examination of the contents of BRN files.

Dates of visit: November 17-20, 2008

(3) Related natural, behavioral and social sciences, sixteen (16) semester or twenty-four (24) quarter units.	X		Related sciences: 20 units
SECTION 1426(d) Theory and clinical practice shall be concurrent in the following nursing areas: medical-surgical, maternal/child, mental health, psychiatric nursing and geriatrics. Instruction will be given in, but not limited to, the following: personal hygiene, human sexuality, client abuse, cultural diversity, nutrition (including therapeutic aspects), pharmacology, legal, social and ethical aspects of nursing, nursing leadership and management.	X		
SECTION 1426(e) The following shall be integrated throughout the entire nursing curriculum.			
(1) nursing process;	X		
(2) basic intervention skills in preventive, remedial, supportive and rehabilitative nursing;	X		
(3) physical, behavioral and social aspects of human development from birth through all age levels;	X		
(4) the knowledge and skills required to develop collegial relationships with health care providers from other disciplines;	X		
(5) communication skills including principles of verbal, written and group communications;	X		
(6) natural sciences including human anatomy, physiology and microbiology; and	X		
(7) related behavioral and social sciences with emphasis on societal and cultural patterns, human development, and behavior relevant to health-illness.	X		
SECTION 1426(f) The course of instruction shall be presented in semester or quarter units under the following formula:			
(1) One (1) hour of instruction in theory each week throughout a semester or quarter equals one (1) unit.	X		
(2) Three (3) hours of clinical practice each week throughout a semester or quarter equals one (1) unit.	X		

LICENSED VOCATIONAL NURSES AND OTHER HEALTH CARE WORKERS:

SECTION 1429(a) An applicant who is licensed in California as a vocational nurse is eligible to apply for licensure as a registered nurse if such applicant has successfully completed the courses prescribed below and meets all the other requirements set forth in Section 2736 of the Code. Such applicant shall submit evidence to the board, including a transcript of successful completion of the requirements set forth in subsection (c) and of successful completion or challenge of courses in physiology and microbiology comparable to such courses required for licensure as a registered nurse.

SECTION 1429(b) The school shall offer objective counseling of this option and evaluate each licensed vocational nurse applicant for admission to its registered nursing program on an individual basis. A school's determination of the prerequisite courses required of a licensed vocational nurse applicant shall be based on an analysis of each applicants academic deficiencies, irrespective of the time such courses were taken.

SECTION 1429(c) The additional education required of licensed vocational nurse applicants shall not exceed a maximum of thirty (30) semester or forty-five (45) quarter units. Courses required for vocational nurse licensure do not count toward fulfillment of the additional education requirement. However, other courses comparable to those required for licensure as a registered nurse, as specified in Section 1426, may be counted toward fulfillment of the additional education requirement.

X

This option is referred to in the catalog, and the director is available to discuss the option with the student.

X

PHYSO 101	Introcuton to Physiology	5 units
MICRO 101	Microbiology	4 units
NURSE 265	Nursing Process:M/S	6 units
NURSE 266	Nursing Process: Mental Health	4 units
NURSE 267	Nursing Process: Advanced Med/Surg	11 units
Total		30 semester units

Nursing courses shall be taken in an accredited school and shall be beyond courses equivalent to the first year of professional nursing courses. The nursing content shall include nursing intervention in acute, preventive, remedial, supportive, rehabilitative and teaching aspects of nursing. Theory and courses with concurrent clinical practice shall include advanced medical-surgical, mental health, psychiatric nursing and geriatric nursing.	X		
The nursing content shall include the basic standards for competent performance prescribed in Section 1443.5 of these regulations.	X		
TRANSFERS AND CHALLENGES:			
SECTION 2786.6 The board shall deny the application for approval made by, and shall revoke the approval given to, any school of nursing which:			
SECTION 2786.6(a) Does not give to student applicants credit, in the field of nursing, for previous education and the opportunity to obtain credit for other acquired knowledge by the use of challenge examinations or other methods of evaluation; or	X		Transfer credit for nursing courses is evaluated on an individual basis for equivalency with the Program's curriculum. An evaluator reviews transcripts from institutions previously attended and determines equivalency with MJC courses. There are five identified grounds for which a prerequisite course may be challenged.
SECTION 2786.6(b) Is operated by a community college and discriminates against an applicant for admission to a school solely on the grounds that the applicant is seeking to fulfill the units of nursing required by Section 2736.6.			No evidence to support that this is occurring.

SECTION 6: CLINICAL FACILITIES / CLINICAL EXPERIENCES			
SECTION 1425.1(b) The registered nurse faculty member shall be responsible for clinical supervision only of those students enrolled in the registered nursing program.	X		
SECTION 1424(i) When non-faculty individuals participate in the instruction and supervision of students obtaining clinical experience, their responsibilities shall be described in writing and kept on file by the nursing program.	X		Preceptors are used in a portion of NURSE 267 in the last semester.
SECTION 1427(a) A nursing program shall not utilize agencies and/or community facilities for clinical experience without prior approval by the board. Each program must submit evidence that it has complied with the requirements of subdivisions (b) and (c) of this section and the policies outlined by the board.			
SECTION 1427(b) A program which utilizes agencies and/or community facilities for clinical experience shall maintain written objectives for student learning in such facilities, stated in measurable performance terms, and shall assign students only to facilities which can provide the experience necessary to meet those objectives.			Clinical sites visited: Doctors Medical Center, Modesto Memorial Medical Center, Modesto Sonora Regional Medical Center, Sonora Doctors Behavioral Health Care, Modesto
SECTION 1427(c) Each such program shall maintain written agreements with such facilities and such agreements shall include the following: (1) Assurance of the availability and appropriateness of the learning environment in relation to the program's written objectives; (2) Provision for orientation of faculty and students; (3) A specification of the responsibilities and authority of the facility's staff as related to the program and to the educational experience of the students;			Insufficient time to review all the agreements. Recommendation: Ensure that the addendum that addresses this regulation's components is part of the agreements that are renewed in 2009 and 2010.

(4) Assurance that staff is adequate in number and quality to insure safe and continuous health care services to the patients;			
(5) Provisions for continuing communication between the facility and the program; and			
(6) A description of the responsibilities of faculty assigned to the facility utilized by the program.			
SECTION 1424(k) The student/teacher ratio in the clinical setting shall be based on the following criteria: 1) acuity of patient needs; 2) objectives of the learning experience; 3) class level of the students; 4) geographic placement of students; 5) teaching methods; and 6) requirements established by the clinical agency.	X		The ratio is 9:1 as much as possible due to the increased acuity of patients in the facilities.
SECTION 1428(c) Tools used to evaluate students' progress and performance and clinical learning experiences shall be stated in measurable terms directly related to course objectives.	X		Students are evaluated for both achievement of the clinical objectives and demonstration of "Overriding Concerns" (accountability, physical jeopardy, emotional jeopardy, therapeutic communication, and asepsis.
SECTION 7: STUDENT PARTICIPATION SECTION 1428(a) Students shall be provided the opportunity to participate with the faculty in the identification of policies and procedures related to students including but not limited to:	X ↓		Students from each semester nominate and elect 3-4 representatives. These student representatives attend each semester's faculty team meetings, usually held weekly. The "lead" representative is usually present for the first 10 minutes of each meeting to present student issues or follow-up on concerns. All the representatives attend a monthly meeting of the ADN Student Nurses' Group where individual or group concerns can be reported, discussed, and attempts made at resolution The Program had developed a document that is very explicit in describing the duties of the representatives. Students also organize subcommittees to plan and carry out specific class activities such as the Career Faire and pinning ceremony.
(1) Philosophy and objectives;	X		
(2) Clinical facilities;	X		
(3) Learning experience; and	X		

(4) Curriculum, instruction and evaluation of the various aspects of the program.	X		
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Sections and Related BRN Approval Rules and Regulations

Section	Rules and Regulations
Section 1: Program Director and Assistant Director	Section 1424 (e); 1424(f); 1425(b) 1 – 5; 1425(c);
Section 2: Total Program Evaluation	Section 1424(b); 1424(b)(1); 1428(b)
Section 3: Sufficiency of Resources	1424(d)
Section 4: Program Administration and Faculty Qualifications	Section 1424(g); 1424(h); 1424(j); 1425; 1425(a); 1425(d); 1425(e); 1425(f);
Section 5: Curriculum	Section 1424(a); 1425; 1425.1(a); 1426(a); 1426(b); 1426(c); 1426(d); 1426(e); 1426(f); 1429(a); 1429(b); 1429(c); 2786.6; 2786.6(a); 2786.6(b)
Section 6: Clinical Facilities and Clinical Experiences	Section 1424(i); 1424(k); 1425.1 (b); 1427(a); 1427(b); 1427(c); 1428(c);
Section 7: Student Participation	Section 1428(a)

NCLEX PASS RATES FIRST TIME CANDIDATES

2001-2009

Dominican University of California

	JUL-SEP		OCT-DEC		JAN-MAR		APR-JUN		ANNUAL RATE	
2001 - 2002	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	16	11 68.75%	3	2 66.67%	11	6 54.55%	8	3 37.50%	38	22 57.89%
2002 - 2003	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	21	16 76.19%	6	5 83.33%	12	8 66.67%	2	2 100.00%	41	31 75.61%
2003 - 2004	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	18	9 50.00%	5	3 60.00%	13	6 46.15%	11	10 90.91%	47	28 59.57%
2004 - 2005	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	10	7 70.00%	1	0 0.00%	13	13 100.00%	11	9 81.82%	35	29 82.86%
2005 - 2006	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	16	16 100.00%	1	1 100.00%	18	16 88.89%	16	14 87.50%	51	47 92.16%
2006 - 2007	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	11	8 72.73%	0	0	35	33 94.29%	13	12 92.31%	59	53 89.83%
2007 - 2008	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	29	22 75.86%	4	3 75.00%	26	23 88.46%	15	12 80.00%	74	60 81.08%
2008 - 2009	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent	Taken	Passed Percent
	35	27 77.14%	4	4 100.00%	0	0	0	0	39	31 79.49%

Monday, February 02, 2009

Source: NCSBN GI-G6 Reports

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BOARD OF REGISTERED NURSING
Education/Licensing Committee
Agenda Item Summary

AGENDA ITEM: 10.3.1

DATE: March 19, 2009

ACTION REQUESTED: Continue/Not Continue Approval of Western University of Health Sciences Nurse Practitioner Program.

REQUESTED BY: Maria E. Bedroni, EdD
Supervising Nursing Education Consultant

BACKGROUND: Diana Lithgow, PhD, MSN, FNP Program Director

An approval visit was conducted by Maria E Bedroni, SNEC and Badrieh Caraway , NEC, on November 18-19, 2008.

This program was approved in 1998 and has graduated 162 students so far, since their first graduation that occurred in January 22, 1999. Enrollment has increased over the last ten years with recent student cohorts ranging between 25-35 students.

There are three tracks offered for this FNP program: A post-master Family Nurse Practitioner certificate only (FNP only); a Master in Science Nurse Practitioner (MSN-only) or a Master of Science-Entry(MSN-E).

The MSN/FNP curriculum requires the completion of 65 semester-units, with 15 clinical units (675 clinical hours). Essentially all students enrolled full time and are expected to complete the program in two years. The curriculum is web-based and designed for adult learners from a variety of areas. Greater than 50 % of the graduates are working in underserved communities or with underserved populations.

Objectives for each course are posted and can be downloaded from the College of Graduate Nursing website along with the course requirements, learning activities and evaluation measures. Students are assigned a faculty advisor who is knowledgeable about the curriculum. In addition faculty members are available via telephone and email. Face-to-face, on-campus seminars are also held generally during the 5th and 10th week of each semester.

Clinical decision making is a central thread throughout the curriculum .Clinical themes are designated for each semester to assure that all the required skills, knowledge and competency testing is completed. MSN/FNP faculty is responsible for maintaining the relevancy and currency of the course they teach. Students evaluate clinical sites and preceptors each semester. Students evaluate faculty at the end of each course.

Students begin their clinical practice in semester one following competency testing at the first seminar weekend, in subsequent semesters students must complete a minimum of 90 hours of clinical practice each semester to progress, as faculty validates concurrent experience throughout

the entire two years. Students must demonstrate clinical competency prior to graduation. Students document clinical experiences via a new web-based system called Thyphon.

Clinical settings include primary care clinics, private practices, urgent care, women's health and pediatric ambulatory settings. Two clinical sites were visited one with an MD preceptor and the other with a NP preceptor.

One recommendation was given related to standardized procedures. Students need to practice writing standardized procedures and also faculty need to be sure that NP preceptors must have current up to date standardized procedures available for the students they are precepting .

NEXT STEPS: Place in Board's agenda

**FINANCIAL IMPLICATIONS,
IF ANY:**

PERSON TO CONTACT: Maria E. Bedroni, EdD, MN, NP, RN
(626) 688-5489

REPORT OF FINDINGS

Western University of Health Sciences Nurse Practitioner Program

Continuing Approval Visit: November 18 – 19, 2008

RECOMMENDATION:

Section 1484(d)(12)(P) Curriculum: NP Role Development

Faculty need to strengthen the experiences developing and implementing SPs. Such experiences should be threaded throughout the courses.

BOARD OF REGISTERED NURSING CONSULTANT APPROVAL REPORT NURSE PRACTITIONER PROGRAM

PROGRAM: Western University of Health Sciences FNP Program

VISIT DATES: November 18-19, 2008

APPROVAL CRITERIA	COMP	NON-COMP	WORK COPY COMMENTS
Section 1484. Standards of Education. The program of study preparing a nurse practitioner shall meet the following criteria: SECTION 1484(a) Purpose, Philosophy and Objectives (1) Have as its primary purpose the preparation of registered nurses who can provide primary health care; (2) Have a clearly defined philosophy available in written form; (3) Have objectives, which reflect the philosophy, stated in behavioral terms, describing the theoretical knowledge and clinical competencies of the graduate.	X		This program is an innovative family nurse practitioner program that integrates web-based courses with onsite campus seminars. The primary role is to improve access to primary care services in rural, urban and underserved communities.
	X		Philosophy of Advanced Nursing Practice is founded in mission statement.
	X		There are specific objectives written for the NP program.
SECTION 1484(b) Administration (1) Be conducted in conjunction with one of the following: (A) An institution of higher education that offers a baccalaureate or higher degree in nursing, medicine or public health. (B) A general acute care hospital licensed pursuant to Chapter 2 (Section 1250) of Division 2 of the Health and Safety Code, which has an organized outpatient department.	X		NP programs are an integral part of the Master's of Science Degree Program
	NA		NA

APPROVAL CRITERIA	COMP	NON-COMP	WORK COPY COMMENTS
(2) Have admission requirements and policies for withdrawal, dismissal and readmission clearly stated and available to the student in written form.	X		All policies clearly stated in student and university catalogs.
(3) Have written policies for clearly informing applicants of the academic status of the program.	X		Academic status is published throughout different sources.
(4) Provide the graduate with official evidence indicating that he/she has demonstrated clinical competence in delivering primary health care and has achieved all other objectives of the program.	X		Upon completion of the required courses the student is awarded a Master of Science in Nursing/Family Nurse Practitioner. A FNP certificate is also given.
(5) Maintain systematic, retrievable records of the program including philosophy, objectives, administration, faculty, curriculum, students and graduates. In case of program discontinuance, the board shall be notified of the method provided for record retrieval.	X		Excellent record keeping procedures.
(6) Provide for program evaluation by faculty and students during and following the program and make results available for public review.	X		Surveys are done. Alumni and employer survey data rate the program as very good.
SECTION 1484(c) Faculty. There shall be an adequate number of qualified faculty to develop and implement the program and to achieve the stated objectives.	X		All faculty are in current practice.
(1) Each faculty person shall demonstrate current competence in the area in which he/she teaches.	X		
(2) The director or co-director of the program shall:	X		Diana Lithgow, PhD, MSN,FNP appointed 2005
(A) Be a registered nurse;			
(B) Hold a Master's or higher degree in nursing or a related health field from an accredited college or university;	X		MSN/FNP from CSULB PhD -UCLA 2005

APPROVAL CRITERIA	COMP	NON-COMP	WORK COPY COMMENTS
(C) Have had one academic year's experience, within the last five (5) years, as an instructor in a school of professional nursing, or in a program preparing nurse practitioners.	X		Faculty since 1997, involved with this program since 1996.
(3) Faculty in the theoretical portion of the program must include instructors who hold a Master's or higher degree in the area in which he or she teaches.	X		All faculty teaching in the NP program hold at least a Master's degree.
(4) A clinical instructor shall hold active licensure to practice his/her respective profession and demonstrate current clinical competence.	X		Clinical preceptors are MDs or NPs. If students are placed with NPs in California, faculty must be sure that the SPs are in place, meet the requirements, and must be available to students.
(5) A clinical instructor shall participate in teaching, supervising and evaluating students, and shall be appropriately matched with the content and skills being taught to the students.	X		Clinical courses are taught by a team of academic faculty who are NPs, with either Master's or DNS degrees, and certified in appropriate areas. All students during clinical practice are visited by faculty.
SECTION 1484(d) Curriculum (1) The program shall include all theoretical and clinical instruction necessary to enable the graduate to provide primary health care for persons for whom he/she will provide care.	X		The curriculum is based on the requirements of AACN, BRN, and specialty certifications such as NONPF. Clinical decision making is a central thread throughout the curriculum.
(2) The program shall provide evaluation of previous education and/or experienced in primary health care for the purpose of granting credit for meeting program requirements.	X		All applicants are evaluated for previous education and experience. Specific criteria are followed.
(3) Training for practice in an area of specialization shall be broad enough, not only to detect and control presenting symptoms, but to minimize the potential for disease progression.	X		Students receive a variety of experiences. There is a clinical coordinator that works with the clinical faculty to monitor the student's clinical progress.

APPROVAL CRITERIA	COMP	NON-COMP	WORK COPY COMMENTS
(4) Curriculum, course content, and plans for clinical experience shall be developed through collaboration of the total faculty.	X		Director and faculty are constantly consulting a number of sources to maintain a curriculum that is current.
(5) Curriculum, course content, methods of instruction and clinical experience shall be consistent with the philosophy and objectives of the program.	X		There are several methods of instruction such as OSCE. Students also use Blackboard for different assignments.
(6) Outlines and descriptions of all learning experiences shall be available, in writing, prior to enrollment of students in the program.	X		The graduate bulletin and catalog describes each course
(7) The program may be full-time or part-time and shall be comprised of not less than (30) semester units,[forty-five (45) quarter units], which shall include theory and supervised clinical practice.	X		Most of the students enrolled are full-time. The MSN/FNP has 65 units and the FNP post Master 47 units. There are 15 units of supervised clinical experience. The program is generally completed over a two year period (three fifteen weeks semesters per year)
(8) The course of instruction shall be calculated according to the following formula: (A) One (1) hour of instruction in theory each week throughout a semester or quarter equals one (1) unit. (B) Three (3) hours of clinical practice each week throughout a semester or quarter equals one (1) unit. (C) One (1) semester equals 16-18 weeks and one (1) quarter equals 10-12 weeks.	X		Program conforms to the formula as specified The theory courses are all web-based
(9) Supervised clinical practice shall consist of two phases: (A) Concurrent with theory, there shall be provided for the student, demonstration of and supervised practice of correlated skills in the clinical setting with patients.	X		The students attend a weekend seminar twice a month. During these seminars there are several activities such as, lectures, clinical skills training, clinical evaluation activities such as OSCE, and individual feedback from the instructors.

APPROVAL CRITERIA	COMP	NON-COMP	WORK COPY COMMENTS
(B) Following acquisition of basic theoretical knowledge prescribed by the curriculum the student shall receive supervised experience s and instruction in an appropriate clinical setting.	X		Students must demonstrate competencies. Exit evaluations are done which includes OSCEs clinical scenarios using standardized patients, two "Day in the Clinic" competency examinations (16 clinical cases) and passing the HESI's preparatory examination for national certification.
(C) At least 12 semester units or 18-quarter units of the program shall be in clinical practice.	X		There are 15 units or 675 hours for clinical experiences.
(10) The duration of clinical experience and the setting shall be such that the student will receive intensive experience in performing the diagnostic and treatment procedures essential to the practice for which the student is being prepared.	X		To assure a well rounded experience students are expected to see patients in the following groups:15%pediatrics, 15% gynecology, 10% obstetrics,40% adults and 20% geriatrics.
(11) The program shall have the responsibility for arranging for clinical instruction and supervision for the student.	X		There is a Clinical Education Coordinator who secures clinical placement. The following sites were visited: 1. Clinica Medica Familiar: Ginger Leon, D.O. preceptor 2.Kaiser West LA -Dorothy L. Lawless FNP, preceptor
(12) The curriculum shall include, but is not limited to:	X		
(A) Normal growth and development	X		Content integrated throughout courses
(B) Pathophysiology	X		Content integrated throughout courses
(C) Interviewing and communication skills	X		Content integrated throughout courses
(D) Eliciting, recording and maintaining a developmental health history	X		Content integrated throughout courses
(E) Comprehensive physical examination	X		Content integrated throughout courses
(F) Psycho-social assessment	X		Content integrated throughout courses

APPROVAL CRITERIA	COMP	NON-COMP	WORK COPY COMMENTS
(G) Interpretation of laboratory findings	X		Content integrated throughout courses
(H) Evaluation of assessment data to define health and developmental problems	X		Content integrated throughout courses
(I) Pharmacology	X		Content integrated throughout courses
(J) Nutrition	X		Content integrated throughout courses
(K) Disease management	X		Content integrated throughout courses
(L) Principles of health maintenance	X		Content integrated throughout courses
(M) Assessment of community resources	X		Content integrated throughout courses
(N) Initiating and providing emergency treatments	X		Content integrated throughout courses
(O) Nurse practitioner role development			Recommendation: Faculty need to strengthen the experiences developing and implementing SPs. Such experiences should be threaded throughout the courses.
(P) Legal implications of advanced practice			
(Q) Health care delivery systems	X		
(13) The course of instruction of a program conducted in a non-academic setting shall be equivalent to that conducted in an academic setting.	NA		

BOARD OF REGISTERED NURSING
Education/Licensing Committee
Agenda Item Summary

AGENDA ITEM: 10.4.1

DATE: March 19, 2009

ACTION REQUESTED: Grant/Not Grant Initial Approval of Westerns Governors University (WGU) Pre-licensure Baccalaureate Degree Nursing Program

REQUESTED BY: Maria E. Bedroni, EdD
Supervising Nursing Education Consultant

BACKGROUND: J. Papenhausen, PhD. Consultant

An initial approval visit was conducted by Maria E Bedroni, SNEC and Carol MacKay, NEC, on February 24 - 25, 2009 at WGU Santa Ana campus office. Present at the time of the visit were: Ms Jan Jones-Schenk, Director of MAP Program, Dr Papenhausen, Consultant, Dr Stacy Ludwig, Associate Provost for Academic Services, and Dr Mary Anne Ramirez, Chair Department of Nursing, by telephone.

WGU is accredited by WASC and several other accrediting agencies and is the first online university, completely competence-based, and the first one to be funded through a multi-state gubernatorial partnership. It was incorporated 11 years ago as a private, nonprofit university. Headquarter is located in Sal Lake City, Utah.

WGU is comprised of four online colleges: the Teachers College, the College of Business, the College of information Technology, and the College of Health Professions. The new pre-licensure BSN program will be under the College of Health Professions. This college already has existing competence-based nursing programs, including a RN to BSN program, a MSN in Leadership/Management, and the MSN in Education program.

The Department of Nursing is an integral part of the university and under the governance of the Chair of the Department of Nursing. The Chair reports to the Provost and Academic Vice President. The implementation of the pre-licensure program in California will be the responsibility of the California Director of Nursing.

The program is a collaborative effort among WGU, its hospital corporation's partners, a private funding foundation, and state workforce agencies. The partners include WGU, the Robert Wood Johnson Foundation, California Labor and Work Force Development agency, and major hospitals, including Hospital Corporation of America, Tenant Healthcare, Kaiser Permanente, and Cedars-Sinai Medical Center.

As submitted by WGU the self study proposes a pre-licensure baccalaureate nursing program serving Los Angeles, Riverside, and Orange counties at three different hospital sites: Cedars Sinai Hospital, Fountain Valley Hospital and Riverside Community Hospital.

The Santa Ana campus office opened January 2009 and is furnished and has the necessary equipment to communicate with students, including phone, computer and internet service. This campus provides space for the California Director of Nursing to conduct program business as well as to meet with the students who may want to speak personally to someone connected with the program.

All students will have nursing faculty **advisor** (a mentor, who will work with the student to guide his/her studies during the program), **didactic** faculty (a faculty who is the subject matter expert who facilitates an online learning community), and faculty for **clinical positions** (individual clinical coach and clinical instructor). The clinical “in person” experiences, i.e., hands-on clinical experience, will be implemented through a model that includes clinical instructors and clinical coaches. The clinical faculty and the clinical coach will be nursing staff employees provided by the hospital partner. The didactic and clinical faculty will all have a California license.

The students will be assigned to a **clinical coach** in the unit, and the coach has the responsibility to provide the clinical care. The student and the clinical coach will work together to provide clinical care to the four patients assigned to the clinical coach. The coach will be required to meet the qualification of a clinical teaching assistant. The WGU clinical instructor would be the faculty person, who is responsible for overseeing the clinical coaches and the students.

The curriculum builds on a strong foundation of liberal arts, sciences and humanities. To assist students in developing competencies, the faculty has developed an approach in BSN education, the CTAS model. The CTAS model incorporates Content Knowledge, Task/Skills Knowledge, Application Knowledge and Synthesis Knowledge into a pedagogical structure that allows students to develop competency through structured, interactive, technology based activities. As the model progresses from content to synthesis, the competencies increase in complexity and application. Students demonstrate competency in the content, tasks skills, and application (through computer based and high fidelity simulation) prior to been assigned to clinical

The BSN curriculum includes domains, sub-domains, and competencies. There are two major domains Nursing Science and Nursing Theory and Practice. The Nursing Theory and Practice Domain consists of didactic and clinical competencies in the major areas of nursing medical – surgical, obstetrics, pediatrics, psychiatric/mental health, and geriatrics. The Nursing Science Domain includes five sub-domains: Pharmacology, Organizational Systems and Quality Leadership, Informatics, Evidence Based Practice and Applied nursing research, and Professional Roles and Values.

The proposed program will include 120 academic credits, the pre-licensure units are 81units. Fifty two units for nursing (theory 34 and clinical 18 units). Eight units for communication and 21 units for sciences plus 39 units for other degree requirements.

WGU has done all the corrections to the areas of deficiencies identified in the self study. However because the clinical model is not in practice and faculty has not been hired the NEC will visit the program again August 2009 prior to the implementation of the clinical model. Simulation labs will also be visited at that time.

In addition to the self study WGU submitted a program launch proposal, a simulation implementation plan and a clinical instructor and clinical teaching assistant handbook. If approved WGU will admit the first cohort of students in July 2009, and faculty will also be hired upon approval. A Program Director must be hired prior to student admissions.

NEXT STEPS: Place on the Board agenda

**FISCAL IMPLICATION (S)
IF ANY:**

PERSON TO CONTACT: Maria E Bedroni, SNEC
brnmaria@sbcglobal.net

Report of Findings

**Western Governors University,
Baccalaureate Degree Nursing Program
Initial Approval Visit Dates: February 24 – 25, 2009**

NON-COMPLIANCE(S): None

RECOMMENDATION(S):

Section 1426(b) Curriculum – Unifying theme

Strengthen the unifying theme throughout all courses

Section 1427 Clinical Facilities

Revise clinical contracts to ensure that the language in these agreements clearly reflects that WGU is responsible for clinical instruction

Section 1428(c) Students

Revise the tools to evaluate students to reflect objectives specific to the course.

**CONSULTANT APPROVAL REPORT
INITIAL PRELICENSURE PROGRAM VISIT**

EDP-S-05 (07/04)

WORKRuth Terry, MPH, RN
Executive Officer
(916) 322-3350
(626) 575-7080

PROGRAM NAME: Westerns Governors University

DATES OF VISIT: February 24-25-, 2009

APPROVAL CRITERIA

EVIDENCE Use Code(s) listed below for location of evidence.	COMP	NON-COMP	COMMENTS <i>WORK COPY</i>
Self study pages 4-31	X		Mission includes a statement for pre-licensure education in addition to BSN education.
Self study pages 7-12 Student handbook	X		All required policies are stated in the student handbook
	X		
Self study page 15	X		
Self study page 17	X		All resources are online: library is through the University of New Mexico. Admission and student progress is done on line.
Self study page 27			The Director position is a full time position with 100% release time.

I. ADMINISTRATION

SECTION 1424(a) There shall be a written statement of philosophy and objectives which serves as a basis for curriculum structure. Such statement shall take into consideration the individual differences of students, including their cultural and ethnic background, learning styles, goals and support systems. It shall also take into consideration the concepts of nursing and man in terms of nursing activities, the environment, the health-illness continuum, and relevant knowledge from related disciplines.

SECTION 1424(b) The policies and procedures by which the program is administered shall be in writing, shall reflect the philosophy and objectives of the program, and shall be available to all students.

(1) The nursing program shall have a written plan for evaluation of the total program, including admission and selection procedures, attrition and retention of students, and performance of graduates in meeting community needs.

SECTION 1424 (c) There shall be an organizational chart which identifies the relationships, lines of authority and channels of communication with the program, between the program and other administrative segments of the institution with which it is affiliated, and between the program, the institution and clinical agencies.

SECTION 1424(d) The program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment to achieve the program's objectives.

SECTION 1424(e) A sufficient period of time shall be set aside, by the institution, exclusively for the use of the director or his or her designee in the administration of the program.

APPROVAL CRITERIA

SECTION 1424(f) The program shall have a registered nurse faculty member who is knowledgeable and current regarding the program and the policies and procedures by which it is administered and who can perform the director's duties in the person's absence.

SECTION 1424(g) The faculty shall have the primary responsibility for developing policies and procedures, planning, organizing, implementing and evaluating all aspects of the program.

SECTION 1424(h) The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas of nursing listed in Section 1426 who shall be responsible for the educational program in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned.

SECTION 1424(i) When non-faculty individuals participate in the instruction and supervision of students obtaining clinical experience, their responsibilities shall be described in writing and kept on file by the nursing program.

SECTION 1424(j) The assistant director shall function under the supervision of the director. Assistant instructors and clinical teaching assistants shall function under the supervision of an instructor.

SECTION 1424(k) The student/teacher ratio in the clinical setting shall be based on the following criteria:

- 1) acuity of patient needs;
- 2) objectives of the learning experience;
- 3) class level of the students;
- 4) geographic placement of students;
- 5) teaching methods; and
- 6) requirements established by the clinical agency.

EVIDENCE Use Code(s) listed below for location of evidence.	COMP	NON-COMP	COMMENTS <i>WORK COPY</i>
Self study page 27	x		An assistant Director will be hired .
Self study page 27	x		Unable to review this area as there is no faculty at this time. The first group of faculty will be available August 2009. At that time a second visit will be done.
Self study page 28			
Self study page 30	x		
Self study page 31			No Assistant Director hired at this time
Self study page 31	x		For the clinical setting students are going to be assigned to a clinical coach (one student/clinical coach). In addition there will be a clinical instructor (CI) . The CI will have a cohort of a maximum of 10 students and ten clinical coaches

APPROVAL CRITERIA

EVIDENCE Use Code(s) listed below for location of evidence.	COMP	NON-COMP	COMMENTS <i>WORK COPY</i>
Self study page 33			Unable to verify this section until a later date when faculty is hired
Self study page 34			
Self study page 34			
Self study page 34			
Self study page 35			
Self study page 35			

II. FACULTY QUALIFICATIONS

SECTION 1425

A program shall report to the board all changes in faculty including changes in faculty including changes in teaching areas, prior to employment of or within 30 days after termination of employment of a faculty member. Such changes shall be reported on forms provided by the board. Faculty members shall possess the following qualifications:

SECTION 1425(a) A nurse faculty member appointed on or after the effective date of these regulations shall hold a valid, active license issued by the board.

SECTION 1425(b) The registered nurse director of the program shall have:

(1) A Master's or higher degree from an accredited college or university which includes course work in nursing, education or administration;

(2) A minimum of one year's experience in an administrative position;

(3) A minimum of two year's experience teaching in pre- or post-licensure nursing programs;

(4) At least one year's experience as a registered nurse providing direct patient care; or

(5) Equivalent experience and/or education as determined by the board.

SECTION 1425(c) The registered nurse assistant director shall meet the education requirements set forth in subsections (b)(1) above and the experience requirements set forth in subsections (b)(3) and (b)(4) above or such experience as the board determines to be equivalent.

SECTION 1425(d) An instructor shall meet the following requirements:

(1) Those set forth in subsections (b)(1) and (b)(4) above; and

(2) Completion of at least one year's experience teaching courses related to nursing or a course which includes practice in teaching nursing.

SECTION 1425(e) An assistant instructor shall have:

APPROVAL CRITERIA

(1) A baccalaureate degree from an accredited college which shall include courses in nursing, or in natural, behavioral or social sciences relevant to nursing practice;

(2) At least one year's continuous, full-time experience in direct patient care practice as a registered nurse.

SECTION 1425(f) A clinical teaching assistant shall have had at least one year's experience, within the previous five years, as a registered nurse providing direct patient care.

EVIDENCE Use Code(s) listed below for location of evidence.	COMP	NON-COMP	COMMENTS	<i>WORK COPY</i>
Self study page 36				
Self study page 36	x		Clinical Instructor (CI) and Clinical Assistant or coaches (CTAs) will be recruited by WGU and the Healthcare Partner. The CI and the CTAs are made adjunct faculty to WGU. They are paid by the healthcare facility Upon selection the adjunct faculty must complete WGU instructional program	
Self study page 36	X		Clinical coaches and clinical instructors will only supervise nursing students enrolled in this program.	
Self study page 368	X		All theory courses are on line. This program is based in online courses and clinical experiences.	
Self study page 38	x		The unifying theme is "a journey to wellness". Students are encouraged to see the patient and the family as they strive to wellness rather than focusing on disease and medical intervention. This model is derived from Patricia Benner's Three Apprenticeships of Cognitive Knowledge, Clinical Reasoning and Ethical Comportment and Expertise in Nursing Practice. <u>Recommendation</u> Strengthen the unifying theme throughout all courses	

III. FACULTY RESPONSIBILITIES

SECTION 1425.1(a) Each faculty member shall assume responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content.

SECTION 1425.1(b) The registered nurse faculty member shall be responsible for clinical supervision only of those students enrolled in the registered nursing program.

IV. REQUIRED CURRICULUM; PRIOR APPROVAL

SECTION 1426(a) The curriculum of a nursing program shall be that set forth in this section. A program's curriculum shall not be implemented or revised until it has been approved by the board.

SECTION 1426(b) The curriculum shall reflect a unifying theme, which includes the nursing process as defined by the faculty, and shall be designed so that a nurse who completes the program will have the knowledge and skills necessary to function in accordance with the minimum standards for competency set forth in Title 16, California Code of Regulations, section 1443.5.

APPROVAL CRITERIA

SECTION 1426(c) The curriculum shall consist of not less than fifty-eight (58) semester units, or eighty-seven (87) quarter units, which shall include at least the following number at least the following number of units in the specified course areas:

(1) Art and science of nursing, thirty-six (36) semester units or fifty-four (54) quarter units, of which eighteen (18) semester or twenty-seven (27) quarter units will be in theory and eighteen (18) semester or twenty-seven (27) quarter units will be in clinical practice.

(2) Communication skills, six (6) semester or nine (9) quarter units. Communication skills shall include principles of verbal, written and group communication.

(3) Related natural, behavioral and social sciences, sixteen (16) semester or twenty-four (24) quarter units.

SECTION 1426(d) Theory and clinical practice shall be concurrent in the following nursing areas: medical-surgical, maternal/child, mental health, psychiatric nursing and geriatrics. Instruction will be given in, but not limited to, the following: personal hygiene, human sexuality, client abuse, cultural diversity, nutrition (including therapeutic aspects), pharmacology, legal, social and ethical aspects of nursing, nursing leadership and management.

SECTION 1426(e) The following shall be integrated throughout the entire nursing curriculum.

(1) nursing process;

(2) basic intervention skills in preventive, remedial, supportive and rehabilitative nursing;

EVIDENCE Use Code(s) listed below for location of evidence.	COMP	NON-COMP	COMMENTS <i>WORK COPY</i>
Self study page 59	x		The curriculum has for the prelicensure program has 120 units for the BSN degree. The pre-licensure units are 81 units: The nursing units are 52. Theory : 34 Clinical 18
	x		Fifty two units
	x		Eight units
	x		Twenty one units. Plus 39 units for other degree requirements
Self study page 61	x		Skills and simulation experiences will occur in designated simulation centers. Students will engage in learning experiences and assessment of competency in designated skills and knowledge application, in "simulation boot camps" in each nursing specialty area. Simulation labs will be scheduled at a minimum for two weekends in each clinical rotation, or four times a term. In order to be scheduled for a simulation lab the student must complete content knowledge assessments through My NursingLab and be referred by the faculty member responsible for the clinical specialty
Self study page 61			All areas are integrated throughout the courses
	x		
	x		

APPROVAL CRITERIA

(3) physical, behavioral and social aspects of human development from birth through all age levels;

(4) the knowledge and skills required to develop collegial relationships with health care providers from other disciplines;

(5) communication skills including principles of verbal, written and group communications;

(6) natural sciences including human anatomy, physiology and microbiology; and

(7) related behavioral and social sciences with emphasis on societal and cultural patterns, human development, and behavior relevant to health-illness.

SECTION 1426(f) The course of instruction shall be presented in semester or quarter units under the following formula:

(1) One (1) hour of instruction in theory each week throughout a semester or quarter equals one (1) unit.

(2) Three (3) hours of clinical practice each week throughout a semester or quarter equals one (1) unit.

EVIDENCE Use Code(s) listed below for location of evidence.	COMP	NON-COMP	COMMENTS <i>WORK COPY</i>
	x		
	x		
	x		
	x		
	x		
Self study page 67	x		All courses comply with the BRN formula.
	x		One hour(1) of instruction in theory equaling one (1) competency unit(credit)
	x		Three hours (3) of clinical practice equaling to one (1) competency unit(credit)
V. CLINICAL FACILITIES SECTION 1427(a) A nursing program shall not utilize agencies and/or community facilities for clinical experience without prior approval by the board. Each program must submit evidence that it has complied with the requirements of subdivisions (b) and (c) of this section and the policies outlined by the board. SECTION 1427(b) A program which utilizes agencies and/or community facilities for clinical experience shall maintain written objectives for student learning in such facilities, stated in measurable performance terms, and shall assign students only to facilities which can provide the experience necessary to meet those objectives.	Self study page 68		Contracts with three hospitals are on file. <u>Recommendation</u> Revise clinical contracts o ensure that the language in these agreements clearly reflects that WGU is responsible for clinical instruction
	Self study page 69		All objectives will be given to clinical coaches and clinical instructors

APPROVAL CRITERIA

SECTION 1427(c) Each such program shall maintain written agreements with such facilities and such agreements shall include the following:

(1) Assurance of the availability and appropriateness of the learning environment in relation to the program's written objectives;

(2) Provision for orientation of faculty and students;

(3) A specification of the responsibilities and authority of the facility's staff as related to the program and to the educational experience of the students;

(4) Assurance that staff is adequate in number and quality to insure safe and continuous health care services to the patients;

(5) Provisions for continuing communication between the facility and the program; and

(6) A description of the responsibilities of faculty assigned to the facility utilized by the program.

VI. STUDENT PARTICIPATION

SECTION 1428(a) Students shall be provided the opportunity to participate with the faculty in the identification of policies and procedures related to students including but not limited to:

(1) Philosophy and objectives;

(2) Clinical facilities;

(3) Learning experience; and

(4) Curriculum, instruction and evaluation of the various aspects of the program.

SECTION 1428(b) The program shall have a procedure for resolving student grievances.

EVIDENCE Use Code(s) listed below for location of evidence.	COMP	NON-COMP	COMMENTS <i>WORK COPY</i>
Self study page 69	x		There are currently three agreements signed : Cedars-Sinai Fountain Valley Riverside Community
Self study page 71			One student will be selected to be in the Nursing Council
Self study page 12			There is a grievance procedure in place

APPROVAL CRITERIA

SECTION 1428(c) Tools used to evaluate students' progress and performance and clinical learning experiences shall be stated in measurable terms directly related to course objectives.

EVIDENCE Use Code(s) listed below for location of evidence.	COMP	NON-COMP	COMMENTS	WORK COPY
Self study page 75			<u>Recommendation</u> Revise the tools to evaluate students to reflect objectives specific to the course	
Self study page 75			A 30 unit option is available	
Self study page 75				
Self study page 76				

VII. LICENSED VOCATIONAL NURSES AND OTHER HEALTH CARE WORKERS

SECTION 1429(a) An applicant who is licensed in California as a vocational nurse is eligible to apply for licensure as a registered nurse if such applicant has successfully completed the courses prescribed below and meets all the other requirements set forth in Section 2736 of the Code. Such applicant shall submit evidence to the board, including a transcript of successful completion of the requirements set forth in subsection (c) and of successful completion or challenge of courses in physiology and microbiology comparable to such courses required for licensure as a registered nurse.

SECTION 1429(b) The school shall offer objective counseling of this option and evaluate each licensed vocational nurse applicant for admission to its registered nursing program on an individual basis. A school's determination of the prerequisite courses required of a licensed vocational nurse applicant shall be based on an analysis of each applicants academic deficiencies, irrespective of the time such courses were taken.

SECTION 1429(c) The additional education required of licensed vocational nurse applicants shall not exceed a maximum of thirty (30) semester or forty-five (45) quarter units. Courses required for vocational nurse licensure do not count toward fulfillment of the additional education requirement. However, other courses comparable to those required for licensure as a registered nurse, as specified in Section 1426, may be counted toward fulfillment of the additional education requirement.

Nursing courses shall be taken in an accredited school and shall be beyond courses equivalent to the first year of professional nursing courses. The nursing content shall include nursing intervention in acute, preventive, remedial, supportive, rehabilitative and teaching aspects of nursing. Theory and courses with concurrent clinical practice shall include advanced medical-surgical, mental health, psychiatric nursing and geriatric nursing.

The nursing content shall include the basic standards for competent performance prescribed in Section 1443.5 of these regulations.

APPROVAL CRITERIA

	EVIDENCE Use Code(s) listed below for location of evidence.	COMP	NON-COMP	COMMENTS <i>WORK COPY</i>
	Self study page 78			All students will be evaluated at the time of admission .t
	Self study page 78	x		There is a policy in place
	Self study page 78			N/A

VIII. TRANSFER AND CHALLENGE

SECTION 2786.6 The board shall deny the application for approval made by, and shall revoke the approval given to, any school of nursing which:

SECTION 2786.6(a) Does not give to student applicants credit, in the field of nursing, for previous education and the opportunity to obtain credit for other acquired knowledge by the use of challenge examinations or other methods of evaluation; or

SECTION 2786.6(b) Is operated by a community college and discriminates against an applicant for admission to a school solely on the grounds that the applicant is seeking to fulfill the units of nursing required by Section 2736.6.

Clinical Instructor and Clinical Teaching Assistant (CTA) Handbook

Identification and Selection

Clinical Instructors and Clinical Teaching Assistants (CTAs) are recruited by WGU and the Healthcare Partner. (See recruitment flyer example and projected timeline for first cohort attached.)

Requirements for participation as a Clinical Teaching Assistant (CTA) include:

- Clinical expert in Nursing Specialty Area
- Must qualify as a Clinical Teaching Assistant (CTA) under the California BRN regulations. This regulation requires one year of experience in the previous five years, as a registered nurse providing direct patient care.
- California Nursing License must be active and unrestricted
- BSN or Masters in Nursing
- Good communication skills, computer literacy, and willingness to learn new technology skills.
- Desire and interest in clinical teaching, and a willingness to complete a short online course on how to be a clinical educator.
- Willingness to participate in an online learning community with other Clinical Teaching Assistants and Clinical Instructors.

Requirements for participation as a Clinical Instructor:

- Clinical expert in Medical / Surgical Nursing
- California Nursing License must be active and unrestricted
- Masters in Nursing
- Good communication skills, computer literacy, and willingness to learn new technology skills.
- Desire and interest in clinical teaching, and a willingness to complete a short online course on how to be a clinical educator.
- Willingness to participate in an online learning community with other Teaching Assistants and Clinical Instructors.

Recruitment flyers are distributed four months prior to beginning of a student cohort. Recruitment information sessions are held at the facility by WGU faculty. New Clinical Instructors and Clinical Teaching Assistants (CTAs) are selected by the end of the first month after recruitment begins. More Clinical Teaching Assistants than immediately required for the cohort will be identified and trained in order to provide coaching during illness or absence of a Clinical Coach.

Clinical Instructors and Clinical Teaching Assistants (CTAs) are made adjunct faculty to Western Governors University. They are paid by the healthcare facility.

Preparation of Clinical Instructors and Clinical Teaching Assistants (CTAs)

Upon selection CIs and CTAs are contacted by the Clinical Coordinator who facilitates the online learning community. New CIs and CTAs are introduced to WGU, their AAPs, learning community, and how to navigate all WGU technology. They work with the Clinical Coordinator to develop competencies and become familiar with working within the WGU system.

During the 6-12 weeks after recruitment the CIs and CTAs must complete the appropriate WGU instructional program. (See attached course of study for CIs and CTAs). Transcript evaluation is completed by WGU Nursing Administration to determine the need for the appropriate educational program. Clinical Instructors who have not completed an educational certification program for teaching nursing, are required to complete the CI course of study. If they have completed a certification program but it did not include student teaching, they will be required to complete just this portion of the program. A special relationship has been developed with Cal State San Marcos to provide access to Student Teaching. Clinical Teaching Assistants all are required to complete the CTA course of study.

Clinical Instructors and Clinical Teaching Assistants (CTAs) engage in ongoing interaction within the learning community to share best practices, discuss issues and concerns, and continue to develop competency as an adjunct faculty member.

Policies and Procedures

Assignment

Clinical Instructors have dedicated time for working with up to ten Coach-Student dyads. They do not have additional healthcare setting responsibilities during this time.

Clinical Teaching Assistants (CTAs) are assigned to one student who works the Coach's schedule and their assigned patients. The matching of Clinical Teaching Assistant to student is completed by the Clinical Coordinator when the student is cleared and referred for clinical. Matching utilizes demographic information on the student including geography, schedule, specialty, and zip code, and on the coach including geography, schedule, and specialty.

Duties

Clinical Instructors oversee up to ten Coach-Student dyads. They provide support in day to day student development of competency. This includes identifying issues and clinical situations for discussion in post conference. The Clinical Instructor then collaborates with the online faculty content expert to conduct the post conference in the online learning community through web conferencing. Clinical Instructors collect daily evaluation data on students from Clinical Teaching Assistants and collaborate with the Clinical Teaching Assistant to prepare the final evaluation. Observation evaluations are based on Key Behaviors as designated on the clinical observation rubric. They then transmit the evaluation to WGU.

Clinical Teaching Assistants (CTAs) work one on one with the student assigned to them on their current schedule. The CTA must have a patient assignment in order to be a coach. The student works with the CTA on the assigned patients according to the student's level of ability. The Clinical Teaching Assistant will be provided with details of the skills the student has passed and competencies demonstrated. The Coach will also be provided with the clinical observation rubric for evaluating the student on a daily basis. The Clinical Teaching Assistant and student meet daily to establish goals for the day, and again at the end of the shift to review progress. Clinical Teaching Assistants meet weekly with the Clinical Instructor to collaborate on evaluation of the student. At any time during the clinical experience the Clinical Teaching Assistant is expected to inform the Clinical Instructor if there are concerns or problems with the student.

Absences

If a Clinical Instructor is absent due to illness or other unforeseen circumstances, he/she will notify the Clinical Coordinator and CNO of the possible absence so that a substitute can be assigned. The Healthcare agencies will provide a suitable substitute who is qualified and dedicated for the assignment.

If a Clinical Teaching Assistant is absent due to illness or other unforeseen circumstances, he/she will notify the Clinical Instructor of the absence as early as possible. The Clinical Instructor will assign another Clinical Teaching Assistant to the student if available. If a coach is not available who qualifies, the Clinical Instructor will notify the student who will not be allowed to participate in clinical that day. Every effort will be made by the agency to find a qualified substitute. The Clinical Coordinator will be informed of the situation and will work with the student to ensure adequate clinical experiences to develop competency within the expected time frame.

If a student is absent, the student is required to notify the Clinical Coordinator and the Clinical Teaching Assistant as soon as possible. The Clinical Coordinator will work with the student to complete additional clinical days in order to demonstrate competency. (See Student Handbook for requirements for Clinical.)

Conflicts with Students

If conflicts arise between students and Clinical Coaches, they will be first reported to the Clinical Instructor who will investigate the conflict. The Clinical Instructor will negotiate between the Clinical Teaching Assistant and Student to attempt to resolve the issue. If it is not possible to negotiate a resolution, the Clinical Instructor will contact the Director of Nursing who will work with the Clinical Coordinator to reassign the student. If the student's behavior is inappropriate for the clinical setting, the Clinical Instructor will notify the Director of Nursing who will determine the action to be taken.

Replacement of Teaching Assistants (CTAs)

In the event that a Clinical Teaching Assistant leaves the program or must be replaced, a qualified replacement will be identified by the Healthcare agency in collaboration with WGU. The Clinical Coordinator will work with the Director of Nursing and Healthcare CNO to identify, and if necessary, train a new Clinical Coach. Additional Clinical Teaching Assistants are recruited in the initial process and trained so that they will be available in such an instance. Every effort will be made to reassign the student as soon as possible to ensure adequate clinical experiences to develop competency within the expected time frame.

Student Evaluation

Students are evaluated by Clinical Teaching Assistants and Clinical Instructors based on identified key behaviors that demonstrate competency in synthesis of content, task skills, and application of knowledge. The Clinical Teaching Assistant uses the rubric tool to document whether or not a student has demonstrated competency in a specific behavioral area. If the student has, they then record anecdotal data to indicate how this behavior was demonstrated. Student must demonstrate consistent behavior over a minimum of three consecutive clinical days in order to be considered to have demonstrated consistent competency. This may differ depending on the behavior. For example, if one behavior is the use of SBAR to communicate to a physician a patient's status, the student may only have the opportunity to demonstrate this behavior on three out of 7 days. If this behavior is demonstrated as competent on three out of seven days, this will be considered passing this competency. However, if the behavior is safety, the student would need to demonstrate this consistently over each day for a minimum of three days. Providing safe care would be expected every day in some form. (See example of clinical observation rubric attached.)

If the student appears to lack skills that should have been demonstrated in skills/simulation lab, the Clinical Teaching Assistant should conference with the student and the Clinical Instructor. The student may be removed from the clinical rotation and sent back to skills/simulation lab for further practice and retesting of competencies.

Program Evaluation

Clinical Instructors and Clinical Teaching Assistants participate in both evaluation of student competency and in program evaluation. CIs and CTAs are expected to complete required surveys on student participation, student preparation for clinical, and student-coach interaction. They also participate in focus groups to collect additional anecdotal data on selection of CIs and CTAs, training, learning community support, the program, and the student experience.

Program Launch Plan Western Governors University BSN Program

Student Recruitment and Enrollment

The initial cohort of students for the July 1, 2009 start date in Southern California will have completed all prerequisites for nursing. This will allow the first cohort to move directly into nursing courses and clinical.

Upon BRN approval, students will initially be recruited from the partner healthcare agencies. Flyers have been sent to facilities for distribution to staff, family of staff, and other agency partners. However, facilities have stated that they cannot recruit students from their staff until the program is approved. Flyers will be posted by March 25.

Information sessions will be held at each healthcare agency the second week of April to answer questions about the program. Enrollment counselors will be present to assist students through the enrollment process. If a student would rather complete enrollment online, enrollment counselors will be available to assist them.

By April 30, interested students will submit their transcripts as they undergo the enrollment process. These will be reviewed by the transcript office using the transfer guidelines developed by the nursing department. Students must have completed all prerequisites including all math and science courses prior to enrollment.

Students will then be required to provide documentation of the following prior to June 15, 2009:

1. Proof of CNA certification
2. Eligible drug and background screening results that are completed not more than 90 days prior to the term when the nursing courses begin.
3. Proof of health insurance, malpractice insurance, current Health Care Provider CPR, physical health exam and required immunizations.

Students will be provided with support by the enrollment counselors to complete financial aid paperwork. All financial aid paperwork must be cleared prior to June 15 for a July 1 start date.

Once all admission requirements are completed, ten students per facility will be accepted for admittance in July. Others who are qualified will be given the option to enter in January, 2010. For the first cohort, students will be selected for admission according to who first completes all admission requirements, with hospital employees given first option.

Students who are selected for the first cohort will attend an information session on June 1, 2009.

Students will begin EWB on July 1, 2009. EWB takes approximately 2 weeks to complete. After this, they will begin the didactic portion of Introduction to Nursing Arts and Sciences and CASAL I.

Faculty Recruitment and Hiring

Recruitment of a California Director of Nursing is currently underway. Three candidates are being interviewed. Prior to decision on a Director, WGU Department of Nursing will determine the prospective candidate's eligibility with the Board of Nursing.

Decision on a Director will be made as soon as possible. It is hoped that this can be completed by the middle of March.

Three current faculty in Obstetrics and Psychiatric/Mental Health have applied for licensure in California. Three additional faculty members (Medical Surgical, Pediatrics, Community Health/geriatrics) are currently licensed in California. Since these faculty also teach in the RN to BSN and MSN programs, additional faculty will need to be hired for the prelicensure BSN program.

Faculty for Medical Surgical Nursing (2; one with a specialty in geriatrics), Psychiatric/Mental Health Nursing, and Critical Care are currently being recruited. Interviews are currently being held for these positions. All faculty that are hired will meet California BRN requirements. Faculty are expected to be hired by April 15 after board approval.

A Simulation Faculty member is being recruited. Several prospective candidates have been interviewed and a qualified person who will meet BRN requirements for faculty, will be hired by April 15 after board approval.

Assessing Student Competency

As students progress through the program, competency is measured through performance tasks, skills checklists, objective exams, case studies, simulations, and MyNursingLab assessments and assignments. Some of these assessments are summative while others are formative.

Formative Assessments Ongoing data from assessments in the form of case studies, MyNursingLab assessments, virtual reality simulation, and high fidelity simulation is collected in an online student portfolio. The faculty member who is responsible for the content area (for example CASAL I or Care of the Developing Family) reviews each student's work and provides feedback for further competency development. The faculty member must determine whether the student has demonstrated competency to move forward in their program. For example, in CASAL I, the student is not released to attend skills lab until he/she has passed the skills content knowledge assessment in MyNursingLab. Results of this assessment are computer graded and documented in the online grade book where the faculty member can review. Once this assessment is passed, the student can be referred for skills lab.

The faculty also follow student discussions in the community about case studies to determine students' clinical reasoning and use of evidence based research. The faculty make the final decision whether the student has demonstrated all competencies required to be referred for a clinical rotation.

Summative Assessments

Objective Assessments. At the end of each nursing specialty area, the student takes an ATI exam for that specialty. This is intended to measure content and application knowledge. This must be completed prior to passing a subdomain and moving on to the next subdomain. To complete an ATI exam, students are referred between 2 and 6 weeks from the desired exam date through the AAP. The assessment office then sets up the exam at a proctored site as close to the student's location as

possible. There are currently 5000 contracted proctored test sites across the country. All Prometric test sites are on contract with WGU. (See attached list of California Prometric Test Centers). Other test sites include State college testing centers. Information is sent to a designated proctor at the test center. This includes the name of the test taker, date and time of test, and passwords needed to access the exam. The exam is completed on the computer and directly submitted for grading by the computer program. The results are electronically transmitted to WGU Assessment Department and are recorded with 48 hours on the student's AAP.

During the Transition-to-Nursing subdomain, students take the ATI diagnostic assessment. This provides a plan for review and study. Once the student feels prepared, they complete the ATI comprehensive exam. This is the final exit exam and must be passed prior to graduation.

Missed Assessments: If a student does not arrive for the scheduled assessment, WGU is notified when the exam is not accessed through the testing site. This registers as a "no pass" on the student's AAP. The student must then reschedule the exam. This takes a minimum of 2 weeks. The student will continue to show a "no pass" on the AAP until they complete and pass the exam. If the student does not pass the exam by the end of the term, it will be recorded as a permanent "no pass". The student is only allowed to receive a permanent "no pass" in a didactic course three times prior to dismissal from the program.

Failed Assessments: A student may attempt an ATI assessment up to three times. Permission must be obtained from the Academic Faculty responsible for that area in order to refer for the exam the third time. After the first failure, the faculty will review what resources the student has engaged in, how the student has progressed in other assignments and formative assessments, and what the coaching report shows as the competency weaknesses. The faculty will work with the student to engage in other learning resources, tutoring, and additional activities to develop competency prior to allowing the student to take the assessment. If a student fails the assessment three times, he/she must appeal any request to retake the exam a fourth time to the Director of Nursing.

Performance Assessments. Performance assessments consist of Directed Response Folios, case studies, and skills check lists. These are all completed and/or submitted online through Taskstream.

There are three Directed Response Folio assessments submitted to Taskstream that students complete during the program. In these folios, students submit the final passed Virtual Reality Simulation along with an analysis, the final passed High Fidelity Simulation results with an analysis (all simulation details and results, and actual video is maintained on the online student portfolio), and the final passed observation sheet from clinical. Clinical Observation rubrics are used by CTAs and CIs to follow students' progress in competency development. Once a student has demonstrated consistent competency on all key behaviors, a final clinical observation scored rubric with anecdotal evidence of the pass is submitted to the folio. All other clinical observation sheets are maintained in the student's online portfolio. The clinical observation form for the Clinical Practicum is submitted as a separate assessment at the end of the program.

Students also complete case studies that are submitted to Taskstream that assess content knowledge and application of knowledge. These include cases in culture and the family, bioethics, psychiatric/mental health, multi system organ failure, genetics, geriatrics, end of life, community assessment, and disaster response. Case studies are graded by subject matter expert nurses in the Assessment Department using rubrics developed by the faculty. A student who does not pass a case

study with a B or better, has the work returned to them with comments by the grader. The faculty responsible for the content area also receives the same feedback (all provided electronically through Taskstream). The faculty then works with the student to develop the competency necessary to successfully complete the case study. The student works through additional learning resources, tutoring, or assistance from the faculty, edits the work on the case study, and resubmits. The case study is then regarded. If the student does not pass again, the grader provides comments, and again the faculty works with the student to develop competency. The student is not limited on the number of times he/she can resubmit a case study during a current term, but must pass the case study prior to the end of the term. If it is not passed, a permanent "no pass" is recorded on the AAP. Students are allowed only two permanent "no pass" prior to being dropped from the program.

Skills are assessed during skills lab by the WGU Simulation Faculty. Skills are assessed in CASAL I, CASAL II, Care of the Developing Family, and Critical Care. Other skills are integrated into simulation experiences where they are assessed. Students are assessed on a selected set of skills and results are entered into an IBT program that scores the assessment and provides feedback to the faculty and student. If a student does not pass all skills the first time, they are informed of the deficiencies and are provided further training and practice. All skills must be passed by the end of the second weekend boot camp for that specialty area. If skills have not been passed, a "no pass" is recorded on the AAP. Students can arrange for additional skills lab experience and testing. However, students are not permitted to attend clinical until the skills are passed. Skills not passed prior to the end of the term become a permanent "no pass" on the student's AAP. Students can only receive two permanent "no passes". After this, students are dismissed from the program.

Simulation Implementation Plan

Overview:

Skills and simulation experiences will occur in designated simulation centers. These centers are chosen based on geographic location, availability of facilities and staff to provide support and teaching for our students and configuration of the lab to provide identified experiences in simulation. A contract with the simulation center is signed between Western Governors University and the simulation center. Students will engage in learning experiences and assessment of competency in designated skills and knowledge application, in "simulation boot camps" in each nursing specialty area.

Schedule:

Simulation labs will be scheduled at a minimum for two weekends each clinical rotation, or four times a term. For the first cohort in California they will be scheduled on weekends at week four and six of a rotation, but based on site availability. If additional lab experiences are needed to allow students more time to develop competency, these will be arranged by the Clinical Coordinator and the center. Dates for use of the simulation lab will be set for a year in advance.

Procedure:

In order to be scheduled for a simulation lab experience, students must complete content knowledge assessments through MyNursingLab and be referred by the faculty member responsible for the clinical specialty. The student then is assigned to a simulation lab by the Clinical Coordinator and attends as described in the example below.

For example, in the initial course of study, CASAL I, the following must occur:

1. Students work through the fundamental of nursing concepts in MyNursingLab, engaging in activities, case studies, video skills with support from the faculty.
2. Students work through virtual reality computer simulations and submit final work and results to the online portfolio. Faculty review work and provide feedback. When faculty determines student has demonstrated competency in the virtual reality environment, they will pass this requirement.
3. Students complete assessment of skills content knowledge through MyNursingLab and submit for grading. Skills content assessment is scored by computer and entered into the online grade book for the faculty member who is responsible for CASAL I.
4. Faculty reviews scores, discusses results with student and if necessary, assists the student to further develop competency.
5. If the student has passed the virtual reality and skills content assessments, the faculty member refers the student for skills lab.

6. The Clinical Coordinator matches the student with a simulation site for a prescheduled skills/simulation boot camp weekend.
7. Student attends simulation boot camp weekend. (See student responsibilities and supplies below.)
8. Student engages with peers, simulation faculty from the facility and with WGU simulation faculty to learn and practice all required skills over a two-day period.
9. Students work in pairs with peers to practice skills and test each other using the skills checklists for all required skills.
10. At the end of day two of the first simulation weekend, the WGU simulation faculty member will assess each student in a set of skills. This will be repeated in the second weekend with another set of skills. (See skills list attached.)
11. Assessment occurs one on one with each student. A set of skills is randomly generated by computer for each student. Sets of skills have been arranged to assure that all students are assigned certain skills and that all sets are weighted the same, even though sets do not all include every skill. All students must demonstrate competency in hand washing and universal precautions in addition to other skills.
12. Assessment results for each student are entered into an internet based testing system for scoring.
13. Scores are generated for the student and faculty member with details of performance. If the student does not pass a skill, the student continues to work with faculty to develop competency in the skill. Once prepared, the student can retest on failed skills.
14. Students, who do not complete a skills assessment in one simulation lab session, must retake the skill assessment in the next skills lab. When this is the final scheduled skills lab for the clinical rotation, students are required to arrange with the Clinical Coordinator to attend another scheduled simulation lab. This may be at a different site, with a different cohort of students, or in a specially scheduled simulation lab experience.
15. Students who pass the skills assessment have their scores electronically reported to WGU and a pass is posted on their AAP within 48 hours.
16. For the second simulation lab experience on week 6, students again must demonstrate a pass on the MyNursingLab assessment of skill content knowledge and then be referred for assignment to a simulation boot camp.
17. Once students have passed both skills labs, they can be referred for CASAL I clinical. (See clinical implementation for details.)

A similar pattern occurs with each clinical specialty area. The major difference is that, as the complexity of clinical specialties increase, students engage in more medium and high fidelity simulation rather than skills. For example, in CASAL II there is a mix of skills and medium fidelity simulation. By Critical Care, it is all medium and high fidelity simulation. However, the same

procedure occurs for each. There is important content knowledge that must be demonstrated through the MyNursingLab assessments prior to referral to simulation lab. This assures that students have the basic knowledge necessary to engage in the simulations. Students then are provided demonstrations in the simulation lab by simulation faculty and WGU faculty, practice together with their peers, and finally are assessed by the WGU faculty.

Simulation Facility Responsibilities

The contracted simulation lab will provide:

1. Access for students and faculty to all manikins (low, med, and high fidelity) during the scheduled time.
2. At least one faculty member of the facility to assist with skills/simulation demonstrations, practice, and oversight.
3. Technical support for simulation during the contracted time.
4. Videotape and DVD replication of high fidelity simulation assessments of students.
5. Computer access for students to practice virtual reality simulation and computer assisted trainers.
6. Computer with Internet access for the WGU faculty to input assessment of skills/simulation.

University Responsibilities

Western Governors University has entered into contract with simulation labs to provide access for students to engage in learning within a simulated environment. This includes contracting for the lab itself with all manikins and for lab faculty and technical support. The University will provide its own faculty member who is trained in simulation to be present during the "simulation boot camps" and any additional simulation lab experiences to work with students in developing competency and to conduct the assessment of competency. The WGU faculty will have additional consumable supplies for emergency situations. (Job description for Simulation Faculty attached.) The University will pay the contracted fee to the facility for use.

Student Responsibilities

The Clinical Simulation Laboratory is a clinical learning environment requiring an understanding of the equipment, policies, and procedures. Students must follow guidelines to insure the usability of the space and equipment associated with it, and effective use of time to develop and demonstrate competencies.

Lab Policies:

1. No food or drink is permitted in the Clinical Simulation Lab. No chewing gum.
2. Everyone must wash their hands prior to using the supplies, manikins.
3. Gloves should be worn whenever gloves would be used in treating a real patient.
4. Students and faculty are expected to leave the lab in the same manner as they found it (i.e. equipment, tables, and chairs).
5. Clinical Simulation Lab supplies and/or equipment are not to be removed from the lab without the written permission of the Lab Coordinator. Consumable supplies belonging to the simulation facility should NOT be used.
6. Professional, safe behavior will be expected when participating in the Clinical Simulation Lab.
7. After practicing skills, students must straighten unit so it is ready for the next student.
8. This is a clinical site, so students must not bring visitors or children to the area.
9. Please alert Simulation staff immediately to any concerns or problems with equipment.

Students are responsible for demonstrating preparation for skills/simulation lab. This includes:

1. Demonstrate competency in pre-lab content knowledge of skills and/or simulation through the MyNursingLab assessments.
2. Arrive at the simulation lab on time. (It is recommended in the student handbook that students make a trial run between home and the simulation center to determine the time necessary for travel and to locate parking.) Students must provide appropriate notification of lateness or absence to the Clinical Coordinator and WGU Simulation Faculty. If a student is late, the faculty has the right to tell the student that they cannot participate in simulation activities for that day.
3. Arrive at the simulation lab in full uniform. No student will be permitted to engage in simulation lab unless in full uniform.
4. Arrive ready to begin working. Students arrive at the simulation center and proceed directly to the lab. Students may not enter the lab unless the faculty are present. Once faculty are present, they will assign students a patient. Students will work in groups of 2-4 per patient depending on skill/simulation. Students will be informed by the simulation faculty what they are to work on that day. In CASAL I and II students will bring their skills check list with them to the site.
5. Bring supplies to the simulation center. Students are required to purchase the supplies that will be used in simulation lab. These are purchased at the beginning of the program. Students are required to regularly determine whether they have sufficient supplies for the lab. (If used appropriately, supplies designated should be sufficient for the required labs.) If a student is required to complete more than the initially scheduled labs in order to develop and demonstrate competency, supplies may need to be replaced. Students are required to restock their supplies prior to the lab. (Note: The WGU Simulation faculty will have an additional supply kit for unforeseen situations so that no consumable supplies will be needed from the facility.)

6. Students may bring books, computers, and supplies to the lab.
7. Students may work only on those skills/simulations that are assigned for that day. If a student demonstrates competency, they may receive additional directions or assignments from the faculty or may work on virtual reality simulations and trainers.
8. Students, who do not pass a skills/simulation lab, must arrange with the Clinical Coordinator to schedule another lab experience.

Additional Questions:

What happens if the lab is closed due to illness or unforeseen circumstances? The facility will notify the Clinical Coordinator and/or the WGU Simulation Faculty who will notify students. The simulation lab experience will be rescheduled at the earliest time. If the facility is not available, an alternative facility will be contacted to arrange lab scheduling.

What happens if the WGU simulation faculty is unable to attend lab due to illness or unforeseen circumstances? Whenever possible a substitute faculty member will attend. This may be the Clinical Coordinator, California Director, or a qualified faculty member identified by the Director. Every effort will be made NOT to cancel a lab experience. (Additional simulation faculty are being trained.)

What happens if a student is unable to attend lab due to illness or acceptable unforeseen circumstances? The student should notify the Clinical Coordinator and/or WGU Simulation Faculty as soon as the student realizes that he/she will be unable to attend the lab. It is the student's responsibility to work with the Clinical Coordinator to arrange for another lab time. This may be at a different site and with a different cohort. Every effort will be made to arrange a time and place for the student. Students who miss simulation lab due to lateness, inappropriate reasons, or do not show on the assigned day, will be rescheduled by the Clinical Coordinator but not before students who have approved absences. (Acceptable absences include illness with doctor's note, children's illness with doctor's note, and death in family.)

What happens if a student fails a skills/simulation lab? Since WGU is a competency based university, all students must demonstrate competency prior to progressing in the program. Students are required to demonstrate competency in skills and application of skills/knowledge through simulation prior to being referred for an onsite clinical rotation. Therefore, students must continue to work in skills/simulation lab until they have demonstrated the required competencies. All students are provided with two weekends per clinical area to complete this requirement. If they are unable to pass the skills/simulation assessments during this time, the Clinical Coordinator will arrange for additional experiences in the skills/simulation lab. This may be in other facilities and with other cohorts. Students may schedule up to four additional skills/simulation lab experiences to develop competency, recognizing that this will delay referral to onsite clinical rotation and may prevent satisfactory academic progress resulting in probation.

BOARD OF REGISTERED NURSING
Education/Licensing Committee
Agenda Item Summary

AGENDA ITEM: 10.5.1

DATE: March 19, 2009

ACTION REQUESTED: Information Only: 2007-2008 Regional Annual School Reports

REQUESTED BY: Julie Campbell-Warnock
Research Program Specialist

BACKGROUND:

The Regional Annual School Reports present the historical analyses of nursing program data from the 2000-2001 BRN Annual School Survey through the 2007-2008 survey for the nine economic regions in California. Each region has a separate report. All data are presented in aggregate form, and describe the overall trends in these regions over the specified periods. The data items addressed include the numbers of nursing programs, enrollments, completions, retention rates, student and faculty census information, and simulation centers.

The nine regions include: (1) Northern California, (2) Northern Sacramento Valley, (3) Greater Sacramento, (4) Bay Area, (5) San Joaquin Valley, (7) Central Coast, (8) Southern California I (Los Angeles and Ventura Counties), (9) Southern California II (Orange, Riverside, and San Bernardino Counties), and (10) Southern Border Region. Counties within each region are detailed in the corresponding report. The Central Sierra (Region 6) does not have any nursing programs and was, therefore, not included in the analyses.

The San Francisco Bay Area Report (Region 4) is attached as a sample. Reports will be made available to the public on the BRN website.

NEXT STEPS: Provide to the full Board and post final reports on the BRN website.

**FINANCIAL IMPLICATIONS,
IF ANY:** None

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California Board of Registered Nursing

2007-2008 Annual School Report

Data Summary and Historical Trend Analysis

A Presentation of Pre-Licensure Nursing Education Programs in California

Bay Area

February 26, 2009

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INTRODUCTION

Each year, the California Board of Registered Nursing (BRN) requires all pre-licensure registered nursing programs in California to complete a survey detailing statistics of their programs, students and faculty. The survey collects data from August 1 through July 31. Information gathered from these surveys is compiled into a database and used to analyze trends in nursing education.

The BRN commissioned the University of California, San Francisco (UCSF) to conduct a historical analysis of data collected from the 2000-2001 survey through the 2007-2008 survey. In this report, we present eight years of historical data from the BRN Annual School Survey. Data analyses were conducted statewide and for nine economic regions¹ in California, with a separate report for each. All reports are available on the BRN website (<http://www.rn.ca.gov/>).

This report presents data from the 10-county Bay Area. Counties in the region include Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano, and Sonoma. All data are presented in aggregate form and describe overall trends in the areas and over the times specified and, therefore, may not be applicable to individual nursing education programs. An interactive database with additional aggregate data derived from the 2000-2001 through 2007-2008 BRN School Surveys will be available for public access on the BRN website.

¹ The nine regions include: (1) Northern California, (2) Northern Sacramento Valley, (3) Greater Sacramento, (4) Bay Area, (5) San Joaquin Valley, (7) Central Coast, (8) Southern California I (Los Angeles and Ventura counties), (9) Southern California II (Orange, Riverside, and San Bernardino counties), and (10) Southern Border Region. Counties within each region are detailed in the corresponding regional report. The Central Sierra (Region 6) does not have any nursing education programs and was, therefore, not included in the analyses.

DATA SUMMARY AND HISTORICAL TREND ANALYSES

This analysis presents pre-licensure program data from the 2007-2008 BRN Annual School Survey in comparison with data from previous years of the survey. Data items addressed include the number of nursing programs, enrollments, completions, retention rates and student and faculty census data.

Trends in Pre-Licensure Nursing Programs

Number of Nursing Programs

There are 30 nursing programs in the Bay Area that lead to RN licensure. Of these programs, 18 are ADN programs, 7 are BSN programs, and 5 are ELM programs. The majority (76.7%) of pre-licensure nursing programs in the Bay Area are public.

Number of Nursing Programs

	<i>Academic Year</i>							
	<i>2000-2001</i>	<i>2001-2002</i>	<i>2002-2003</i>	<i>2003-2004</i>	<i>2004-2005</i>	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>
Total # Nursing Programs	27	27	27	27	28	28	29	30
<i>ADN Programs</i>	16	16	16	16	16	16	17	18
<i>BSN Programs</i>	7	7	7	7	7	7	7	7
<i>ELM Programs</i>	4	4	4	4	5	5	5	5
<i>Public Programs</i>	21	21	21	21	22	22	22	23
<i>Private Programs</i>	6	6	6	6	6	6	7	7

Admission Spaces and New Student Enrollments

Admission spaces available for new student enrollments increased by 40.7% (n=685), from 1,683 spaces in 2000-2001 to 2,368 in 2007-2008. These spaces were filled with a total of 2,809 students, increasing new student enrollment by 95.6% (n=1,373) from 2000-2001.

Availability and Utilization of Admission Spaces

	<i>Academic Year</i>							
	<i>2000-2001</i>	<i>2001-2002</i>	<i>2002-2003</i>	<i>2003-2004</i>	<i>2004-2005</i>	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>
Spaces Available	1,683	1,659	1,806	1,869	2,060	2,193	2,319	2,368
New Student Enrollments	1,436	1,524	1,776	1,894	2,091	2,250	2,521	2,809
% Spaces Filled	85.3%	91.9%	98.3%	101.3%	101.5%	102.6%	108.7%	118.6%

While nursing programs still receive more applications requesting entrance into their programs than can be accommodated, for the first time in eight years there was a drop in the number of qualified applications to Bay Area nursing programs. In addition, the share of qualified applications that were not accepted for admission dropped for the first time since 2002. In 2007-2008, 62.3% (n=4,643) of qualified applications to Bay Area nursing education programs were not accepted for admission.

Applications Accepted and Not Accepted for Admission

	<i>Academic Year</i>							
	<i>2000-2001</i>	<i>2001-2002</i>	<i>2002-2003</i>	<i>2003-2004</i>	<i>2004-2005</i>	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>
Qualified Applications	2,681	2,578	4,015	4,567	5,445	6,623	8,070	7,452
<i>Accepted</i>	1,436	1,524	1,776	1,894	2,091	2,250	2,521	2,809
<i>Not Accepted</i>	1,245	1,054	2,239	2,673	3,354	4,373	5,549	4,643
% Qualified Applications Not Accepted	46.4%	40.9%	55.8%	58.5%	61.6%	66.0%	68.8%	62.3%

**Since these data represent applications rather than individuals, an increase in qualified applications may not represent equal growth in the number of individuals applying to nursing school.

Enrollments in all types of pre-licensure nursing education programs have increased since 2000-2001. Almost half (49.1%) of nursing students in the Bay Area are educated in public ADN programs.

New Student Enrollment by Program Type

	<i>Academic Year</i>							
	<i>2000-2001</i>	<i>2001-2002</i>	<i>2002-2003</i>	<i>2003-2004</i>	<i>2004-2005</i>	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>
New Student Enrollment	1,436	1,524	1,776	1,894	2,091	2,250	2,521	2,809
<i>ADN</i>	745	781	882	961	1,039	1,113	1,332	1,378
<i>BSN</i>	531	556	686	672	777	846	872	1,100
<i>ELM</i>	160	187	208	261	275	291	317	331
<i>Private</i>	314	347	428	560	592	664	764	900
<i>Public</i>	1,122	1,177	1,348	1,334	1,499	1,586	1,757	1,909

Student Completions

The number of students that completed a nursing program in the Bay Area increased by 93.2% (n=1,058), from 1,135 in 2000-2001 to 2,193 in 2007-2008. Of the 2,193 students that completed a nursing program in the Bay Area in 2007-2008, 45.3% (n=993) of them completed an ADN program, 44.4% (n=973) completed a BSN program, and 10.4% (n=227) completed an ELM program.

Student Completions

	<i>Academic Year</i>							
	<i>2000-2001</i>	<i>2001-2002</i>	<i>2002-2003</i>	<i>2003-2004</i>	<i>2004-2005</i>	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>
Student Completions	1,135	1,238	1,305	1,423	1,595	1,752	1,788	2,193
<i>ADN</i>	642	659	703	787	821	903	863	993
<i>BSN</i>	391	453	443	474	569	639	697	973
<i>ELM</i>	102	126	159	162	205	210	228	227

Retention Rate

Of the 2,205 students scheduled to complete a nursing program in the 2007-2008 academic year, 79.2% (n=1,746) completed the program on-time, 6.9% (n=153) are still enrolled in the program, and 13.9% (n=306) dropped out or were disqualified from the program. The retention rate has remained around 80% for the past three years.

Student Cohort Completion and Retention Data

	<i>Academic Year</i>							
	<i>2000-2001</i>	<i>2001-2002</i>	<i>2002-2003</i>	<i>2003-2004</i>	<i>2004-2005</i>	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>
Enrollment	2,098	1,690	2,025	1,824	2,023	1,781	1,965	2,205
<i>Completed On Time</i>	1,504	1,205	1,599	1,455	1,496	1,427	1,591	1,746
<i>Still Enrolled</i>	273	259	146	132	120	101	137	153
<i>Attrition</i>	321	226	280	237	407	253	237	306
Retention Rate*	71.7%	71.3%	79.0%	79.8%	73.9%	80.1%	81.0%	79.2%
Attrition Rate	15.3%	13.4%	13.8%	13.0%	20.1%	14.2%	12.1%	13.9%
% Still Enrolled	13.0%	15.3%	7.2%	7.2%	5.9%	5.7%	7.0%	6.9%

*Retention rate = (students who completed the program on-time) / (enrollment)

From 2006-2007 to 2007-2008, attrition rates in BSN programs remained relatively constant, while rates in ADN programs increased by 3.0% and rates in ELM programs decreased by 3.3%. Trends in attrition by program type show that ELM programs have lower attrition rates than ADN and BSN programs. Attrition rates in private nursing programs decreased by 3.5%, from 9.6% in 2006-2007 to 6.1% in 2007-2008, while rates at public programs increased by 4.1% during the same time period.

Attrition Rates by Program Type

Program Type	<i>Academic Year</i>							
	<i>2000-2001</i>	<i>2001-2002</i>	<i>2002-2003</i>	<i>2003-2004</i>	<i>2004-2005</i>	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>
ADN	21.5%	17.1%	20.8%	14.4%	24.3%	18.9%	17.0%	21.0%
BSN	11.2%	13.7%	10.0%	13.0%	15.2%	10.5%	6.5%	6.3%
ELM	3.3%	1.2%	2.4%	5.4%	16.3%	5.0%	8.8%	5.5%
Private	11.3%	6.6%	7.6%	4.8%	19.2%	12.3%	9.6%	6.1%
Public	17.0%	17.8%	18.0%	16.2%	20.5%	15.0%	13.1%	17.2%

There has been fluctuation in the retention and attrition rates over the eight-year period documented in the above table. There were changes to the survey between 2003-2004 and 2004-2005, and between 2004-2005 and 2005-2006 that may have affected the comparability of these data over time.

Student Census Data

The total number of students enrolled in Bay Area nursing programs increased by 67.2% (n=2,156), from 3,209 on October 15, 2001, to 5,365 on October 15, 2008. The reported number of pre-nursing students increased from 4,285 in 2005 to 6,676 in 2006.

Student Census Data

Program Track	Academic Year							
	2000-2001	2001-2002	2002-2003	2003-2004	2004-2005	2005-2006	2006-2007	2007-2008
ADN Program	1,359	1,376	1,660	1,661	1,885	1,621	1,935	2,208
BSN Program	1,660	1,523	1,927	1,971	2,251	2,431	2,179	2,556
ELM Program	190	148	338	487	472	422	586	601
Total Nursing Students	3,209	3,047	3,925	4,119	4,608	4,474	4,700	5,365
Pre-Nursing Students					4,285	3,334	5,267	6,676

*Blank cells indicated that the applicable information was not requested in the given year.

Clinical Simulation in Nursing Education

Data show that 69.2% (n=18) of the 26 nursing schools in the Bay Area region used a clinical simulation center² between 8/1/07 and 7/31/08. Most schools that use clinical simulation centers reported using these facilities to standardize clinical experiences and to provide clinical experience not available in a clinical setting. Data gathered also show that 72.2% (n=13) of the 18 nursing schools that currently use a clinical simulation center have plans to expand it.

Reasons for Using a Clinical Simulation Center*	2007-2008
To standardize clinical experiences	88.9%
To provide clinical experience not available in a clinical setting	88.9%
To check clinical competencies	55.6%
To make up for clinical experiences	44.4%
To increase capacity in your nursing program	22.2%
Number of schools that use a clinical simulation center	18

*These data were collected for the first time in 2006-2007. However, changes in these questions for the 2007-2008 administration of the survey and lack of confidence in the reliability of the 2006-2007 data prevent comparability of the data. Therefore, data from previous years of the survey are not shown.

² Clinical Simulation Center/Experience - students have a simulated real-time nursing care experience using hi-fidelity mannequins and clinical scenarios, which allow them to integrate, apply, and refine specific skills and abilities that are based on theoretical concepts and scientific knowledge. The experience includes videotaping, de-briefing and dialogue as part of the learning process.

Faculty Census Data

The total number of nursing faculty in the Bay Area increased by 6.6% (n=53) over the last year. On October 15, 2008, there were 855 total nursing faculty. Of these faculty, 38.9% (n=333) were full-time and 61.1% (n=522) were part-time.

Although there was an increase in the total number of nursing faculty in 2008, that increase has not kept pace with the need for faculty. On October 15, 2008, there were 31 vacant faculty positions in the Bay Area. These vacancies represent a 3.5% faculty vacancy rate, the lowest vacancy rate in the region in four years.

Faculty Data

	<i>Academic Year</i>							
	<i>2000-2001</i>	<i>2001-2002</i>	<i>2002-2003</i>	<i>2003-2004</i>	<i>2004-2005*</i>	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>
Total Faculty	475	506	533	579	623	652	802	855
<i>Full-time</i>	240	252	260	240	190	237	334	333
<i>Part-time</i>	235	254	273	339	201	415	466	522
Vacancy Rate**		3.6%	5.8%	3.5%	5.5%	10.7%	4.8%	3.5%
<i>Vacancies</i>		19	33	21	36	78	40	31

In 2004-2005, 2005-2006 and 2006-2007, the sum of full- and part-time faculty did not equal the total faculty reported.

*Faculty vacancies were estimated based on the vacant FTEs reported.

**Vacancy rate = number of vacancies/(total faculty + number of vacancies)

Summary

In the past eight years, the number of pre-licensure nursing programs in the Bay Area has grown by 11.1%, to 30 programs in 2007-2008. Since 2000-2001, admission spaces have grown by 40.7% (n=685) and new student enrollments have almost doubled (n=1,373). Bay Area nursing programs continue to receive more qualified applications than can be accommodated, even though the number of qualified applications to these programs has decreased for the first time in eight years.

Bay Area nursing programs continue to produce a growing number of RN graduates. The total number of graduates in the region has almost doubled (n=1,058) since 2000-2001, and 2007-2008 saw the greatest annual increase in student completions (22.7%, n=405) over the eight-year period. Retention rates in Bay Area nursing programs have remained around 80% since 2005-2006, while attrition rates have fluctuated between 12.1% and 14.2% over the past three years.

Expansion in RN education has required nursing programs to hire more faculty to teach the growing number of students. Although the number of nursing faculty has grown by 80.0% (n=380) since 2000-2001, faculty hires have not kept pace with the growth in California pre-licensure nursing programs. In 2007-2008, 31 faculty vacancies were reported, representing a 3.5% faculty vacancy rate. Although this vacancy rate is the lowest reported in four years, RN programs will not be able to continue their expansion without more faculty.

APPENDIX A – Bay Area Nursing Education Programs

ADN Programs

Cabrillo College
Chabot College
City College of San Francisco
College of Marin
College of San Mateo
Contra Costa College
De Anza College
Evergreen Valley College
Gavilan College
Los Medanos College
Merritt College
* Mission College
Napa Valley College
Ohlone College
Pacific Union College - Angwin Campus
Santa Rosa Junior College
Solano Community College
Unitek College

BSN Programs

CSU East Bay - Hayward
Dominican University of California
Samuel Merritt College
San Francisco State University
San Jose State University
Sonoma State University
University of San Francisco

ELM Programs

Samuel Merritt College
San Francisco State University
Sonoma State University
University of California San Francisco
University of San Francisco

* - New programs in 2007-2008.

APPENDIX B – BRN Education Advisory Committee Members

BRN Education Advisory Committee Members

Members

Sherry Fox, Chair
Barbara Whitney
Deloras Jones
Jim Comins
Loucine Huckabay
Margaret Craig
Marilyn Herrmann
Stephanie Leach
Sue Albert

Organization

California State University, Chico
California Community College Chancellor's Office
California Institute of Nursing and Health Care
California Community College Chancellor's Office
California State University, Long Beach
Napa Valley College
Loma Linda University
California Labor and Workforce Development Agency
College of the Canyons

Ex-Officio Members

Ruth Ann Terry
Louise Bailey

California Board of Registered Nursing
California Board of Registered Nursing

Project Managers

Carol Mackay
Julie Campbell-Warnock

California Board of Registered Nursing
California Board of Registered Nursing